FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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ON	1B APF	ROVAL
OMB Numl	ber:	3235-0287

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See Note

Estimated average burden

hours per response

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* SANDELL SCOTT D					2. Issuer Name and Ticker or Trading Symbol Tracon Pharmaceuticals, Inc. [TCON]							ationship of F c all applicab Director		Person((s) to Issue 10% Ow		
(Last) (First) (Middle) 1954 GREENSPRING DRIVE SUITE 600				3. Date of Earliest Transaction (Month/Day/Year) 02/04/2015						Officer (give title below)		Other (spe below)		pecify			
(Street) TIMONIUM MD 21093					4. If Amendment, Date of Original Filed (Month/Day/Year)					I	X Form filed by More than One Reporting Person Form filed by More than One Reporting Person						
(City)	(Si	tate)	(Zip)	n-Deriv	ativo S	Securities Ac	nuired	Die	nosed (of or	Rene	ficially O	wned				
Date			2. Transa Date			3. Transaction Code (Instr.		4. Secur	urities Acquired (A) or led Of (D) (Instr. 3, 4 a		A) or	5. Amount Securities Beneficially Following F	Amount of ecurities eneficially Owned ollowing Reported		Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount		(A) or (D)	Price	Transaction (Instr. 3 and				(Instr. 4)
Common Stock 02.				02/04/	/2015		С		1,388,	,474	A	(1)	1,388,474		I		See Note 2 ⁽²⁾
Common Stock 02/04				/2015		P		500,000 A		\$10 ⁽³⁾	1,888,	1,888,474			See Note 2 ⁽²⁾		
						curities Acq Ills, warrants							ned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 1. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)		Code	saction e (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	ive Expiration Date (Month/Day/Year) osed of		Securities Under		erlying	8. Price of Derivative Security (Instr. 5) Benefici Owned Followir Reporte		ve Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Beneficial Ownership (Instr. 4)			

02/04/2015 Convertible Preferred Stock

Explanation of Responses:

Series B Redeemable

1. In connection with the Issuer's initial public offering on February 4, 2015, the shares of Series B Redeemable Convertible Preferred Stock automatically converted into the Issuer's common stock at a rate of 1 share of common stock for each 3.87 shares of Preferred Stock for no additional consideration. The Series B Redeemable Convertible Preferred Stock had no expiration date.

Date

Exercisable

(1)

Expiration Date

(1)

Title

Commo Stock

- 2. The Reporting Person is a director of NEA 14 GP, LTD, which is the sole general partner of NEA Partners 14, L.P. ("NEA Partners 14"). NEA Partners 14 is the sole general partner of New Enterprise Associates 14, L.P. ("NEA 14"), which is the direct beneficial owner of the securities. The Reporting Person disclaims beneficial ownership, within the meaning of Section 16 of the Securities Exchange Act of 1934, as amended, or otherwise of such portion of the NEA 14 shares in which the Reporting Person has no pecuniary interest.
- 3. NEA 14 purchased these shares directly from the Issuer in a private placement.

/s/ Sasha Keough, attorney-in-

Amount or Number of

1,388,474(1)

Shares

02/05/2015

(Instr. 4)

(1)

Transaction(s)

0

<u>fact</u>

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

C

(A) (D)

5,373,396

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.