FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0287							
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* THEUER CHARLES				2. Issuer Name and Ticker or Trading Symbol Tracon Pharmaceuticals, Inc. [TCON]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
												X	Director			10% Ow	ner		
(Last) (First) (Middle)					Date of Earliest Transaction (Month/Day/Year)								- X	Officer (below)	(give title		Other (s below)	pecify	
8910 UNIVERSITY CENTER LANE					01/20/2017								President and CEO						
SUITE 700																			
(0)					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SAN DI	EGO C	۸	92122										X	Form fil	ed by One	Repo	rting Person		
SAN DII	EGO C	A	92122											Form fil	ed by Mor	e than	One Report	_{ina}	
														Person	,				
(City)	(S	tate)	(Zip)																
		Та	ble I - Non-	-Deriva	ive S	ecurities	s Acc	quired, I	Disp	osed c	of, or B	enef	icially	Owned					
Date			2. Transac Date (Month/Da	Execution Date,		Code (Instr.			A) or , 4 and 5	Securities Beneficial Owned Fo		Form (D) or (I) (In (I) (In (I) (I)		7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount	(A) (D)	or	Price	Reported Transacti (Instr. 3 a	saction(s)			(Instr. 4)	
Common Stock 01/2			01/23/2	/2016		F ⁽¹⁾		9,870 D		,	\$4.85	86,1	5,145 ⁽²⁾		D				
			Table II - D	Perivati	re Sec	urities	Acaı	uired. Di	spc	sed of	or Bei	nefic	ially (Owned			<u> </u>		
								option			•		•						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	rcise (Month/Day/Year) if any if (Mon tive		Code	saction e (Instr.	Derivative E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code	, v	(A)		Date Exercisable		xpiration ate	Title	or Nu	nount mber Shares		(Instr. 4)				
Employee Stock Option (Right to Buy)	\$5.15	01/20/2017		A		190,000		(3)	0	1/19/2027	Commor Stock	19	0,000	\$0.00	190,00	00	D		

Explanation of Responses:

- 1. Shares withheld to satisfy the Reporting Person's tax obligation in connection with the vesting of restricted stock units.
- 2. Includes 2,615 shares acquired under the 2015 Employee Stock Purchase Plan on April 20, 2016.
- 3. 1/4th of the shares subject to this option shall vest on the first anniversary of the Grant Date shown in column 3 above. The remaining shares vest and become exercisable in 36 equal monthly installments thereafter, on the last day of each month.

Remarks:

/s/ Patricia L. Bitar, Attorney-in-Fact

01/24/2017

<u>in-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).

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.