FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

washington, b.c. 20049

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	OMB Number:	3235-0287
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l	hours per response:	0.5

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. Relationshi (Check all app X Direc		olicable)		Person(s) to Issuer 10% Owner	
(Last) (First) (Middle) 4350 LA JOLLA VILLAGE DRIVE SUITE 800						3. Date of Earliest Transaction (Month/Day/Year) 01/22/2018									X Officer (give title below) President a			Other (specify below) and CEO		
(Street) SAN DIEGO CA 92122 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Ac	quired	, Dis	posed o	of, or	r Ben	eficia	ally (Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		Code	Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3,			4 and Sec Ben		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	Code V			(A) or (D)	Price	,	Transaction(s) (Instr. 3 and 4)				(1130.1.4)
Common Stock 01/22/					/2018			F ⁽¹⁾	F ⁽¹⁾ 9,290		D \$2		\$2.	.95 76,855		6,855	D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3) Conversion or Exercion or Exercion or Exercion Derivative Security		3. Transaction Date (Month/Day/Year)	Execution Dat		4. Transaction Code (Instr. 8)		ı of	rities ired r osed) : 3, 4	Expirati (Month/	Date Exercisable and Diration Date Date Date Date Date Date Date Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		ount nber	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

1. Shares withheld to satisfy the Reporting Person's tax obligation in connection with the vesting of restricted stock units.

Remarks:

/s/ Patricia L. Bitar, Attorney-

in-Fact

** 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.