FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
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

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Name and Address of Reporting Person* Opaleye Management Inc.						2. Issuer Name and Ticker or Trading Symbol Tracon Pharmaceuticals, Inc. ["TCON"]										Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner				
(Last) ONE BC	`	irst) ACE, 26TH FLO	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/22/2020									Officer (give title Other (specification) below)					
(Street)	N M	IA	02108		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							r)	Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	State)	(Zip)													Person				
		Ta	able I - No	n-Deri	ivati	ve S	ecuri	ities	Acq	uired,	Dis	pose	d of, or	Ben	eficially	Owned				
Dat		Date	Transaction te onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		,	3. Transa Code (8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			5. Amount Securities Beneficial Owned Fo	y	Form:	Direct Indirect Etr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	Code V		nt	nt (A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)	
Common Stock, par value \$0.001 per share 12/2			2/20	/2020			P		496,277		A	\$8.06	2,293,371			I (By Opaleye, P. ⁽¹⁾			
Common Stock, par value \$0.001 per share														225,000			I I	By Managed Account ⁽²⁾		
			Table II -										of, or E			Owned			,	
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction 3A. Deemed Execution Date, Curity or Exercise (Month/Day/Year) if any		ransa Code (I		of I		Expi	6. Date Exercisable Expiration Date (Month/Day/Year)			and 7. Title and Amount Securities Underlyin Derivative Security (i 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ve es ally ig d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				С	Code	v			Date Exer	cisable	Expi Date	ration	Title		unt or ber of es					
Pre- funded warrant	\$0.01								08/2	7/2020	08/2	7/2027	Commor Stock	1,88	39,513 ⁽³⁾		\$1,889	,513	I	BY OPALEYE, L.P. ⁽¹⁾
Pre- funded warrant	\$0.01								08/3	1/2020	08/3	1/2027	Commor Stock	1,35	58,993 ⁽³⁾		\$1,358	,993	I	BY OPALEYE, L.P. ⁽¹⁾

Explanation of Responses:

- 1. Represents securities owned directly by Opaleye, L.P. (the "Fund"). As the investment manager of the Fund, Opaleye Management Inc. may be deemed to beneficially own the securities owned directly by the Fund.
- 2. Securities owned by a separately managed account (the "Managed Account"). As the portfolio manager of the Managed Account, Opaleye may be deemed to beneficially own the securities owned directly by the Managed Account.
- 3. The warrants may not be exercised to the extent that such exercise would cause the reporting person and its affiliates to beneficially own more than 9.99% of the Issuer's then outstanding common stock.

Opaleye Management Inc., By: /s/ James Silverman, President

12/28/2020

** 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.