FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549	
wasnington,	D.C.	20549	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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)								
THEOER CHARLES											-		X	Direc	tor		10% Ov	vner	
(Last)	(Fi	rst) (I	Middle)		3. Da	Date of Earliest Transaction (Month/Day/Year)								X	Office belov	er (give title v)		Other (s pelow)	specify
4350 LA JOLLA VILLAGE DRIVE			12/1	12/14/2022						President and CEO									
SUITE 800																			
					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						, 1	6. Individual or Joint/Group Filing (Check Applicable						
(Street)							,		Ü		•			Line)					.
SAN DII	EGO C	A 9	2122											X		filed by One	•	•	
,														Form filed by More than One Reporting Person				orting	
(City)	(S	tate) (2	Zip)																
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	uired	l, Dis	posed of	, or E	Benefic	cially	Own	ed			
1. Title of S	Security (Ins	tr. 3)		2. Transact	ion	on 2A. Deemed Execution Date,			3. Transa	3. 4. Securities Acquired (A) Transaction Disposed Of (D) (Instr. 3, 4							6. Ownership Form: Direct		7. Nature of Indirect
(Month/Day					Code (Instr. 5)			,	Benefi Owned		l Following	(D) or Inc (I) (Instr.	) or Indirect (Instr. 4)	Beneficial Ownership					
									Code	v	Amount	(A) o	Price	•	Report Transa (Instr.	ed ction(s) 3 and 4)			(Instr. 4)
Common Stock 12/14/2			022		P		23,000	A	\$1.2	2937	937 333,118		D						
		Tal	ole II -	Derivati	ive Se	curit	ties /	4can	ired.	Disn	osed of,	or Be	nefici	ally (	) Owne	d			
											onvertib					-			
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  (Instr. 3)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  34. Deemed Execution Date, if any (Month/Day/Year)		tion Date,		Transaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	n: ct (D) idirect	Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amoun or Numbe of Shares						

Explanation of Responses:

Remarks:

/s/ Scott B. Brown, Attorney-

in-Fact

\*\* Signature of Reporting Person

Date

12/15/2022

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.