FORM 4

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

nington,	D.C.	20549				

l	OMB APPROV	VAL
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ì	Section 16. Form 4 or Form 5
,	obligations may continue. See
	Inetruction 1/h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

		*					. ,					ACT 01 13-		E	alationchin	of Doporting	Dorcon(c) to lo	nuor 1
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol Tracon Pharmaceuticals, Inc. [ TCON ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Opaleye Management Inc.					Tracon Frantinaceuticus, Inc. [ 10010 ]									Director		X 10%	Owner	
(Last) (First) (Middle) ONE BOSTON PLACE, 26TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 01/28/2022									Officer (give title Other (specify below)			
(Street) BOSTON MA 02108					4. If Amendment, Date of Original Filed (Month/Day/Year)							n/Day/Year	- 1	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
(City) (State) (Zip)																		
		7	Гable I - Non-	Deriva	tive S	Secu	rities	Acqui	ired	, Disp	ose	ed of, or	Benef	ficially	Owned			
in this or security (mean s)				Date	Transaction ite onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)					4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amo	ount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			(msu. 4)
Common Stock, par value \$0.001 per share				01/28/2022					P			500	A	\$2.2	2,8	20,500	I	By Opaleye, L.P. <sup>(1)</sup>
			Table II - D									l of, or E ertible s			Owned	,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Expirati		Expiratio	e Exercisable and tion Date n/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		ng	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)		Date Exercisa		Expirati Date		Title	Amount Number Shares					
Prefunded Warrants	\$0.01							08/27/20	)20	08/27/2	027	Common Stock	1,889,	513 <sup>(3)</sup>		1,889,513	I	By Opaleye,L.P. <sup>(3)</sup>
Prefunded Warrants	\$0.01							08/31/20	)20	08/31/2	027	Common Stock	1,358,	593 <sup>(3)</sup>		1,358,593	I	By Opaleye,L.P. <sup>(3)</sup>

## **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. The common stock was purchased by the reporting person in open market transactions on the transaction date, with a purchase price of \$2.20
- 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 issuers then outstanding shares.

Opaleye Management Inc., By:

01/31/2022

/s/ James Silverman, President \*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.