FORM 3

UNIT 3002-3004,30TH FLR,GLOUCESTER TOWER THE LANDMARK, 15 QUEENS ROAD CENTRAL

(State)

UNIT 3002-3004,30TH FLR,GLOUCESTER TOWER

1. Name and Address of Reporting Person\*

(Zip)

(Middle)

(Street)

(City)

Yu Fan

HONG KONG

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

OMB APPROVAL

OMB Number: 3235-0104

Estimated average burden

					SECORITIES			hours per	response: 0.5	
					n 16(a) of the Securities Exchange A					
1. Name and Address of Reporting Person*  Ally Bridge LB Healthcare Master  Fund Ltd			2. Date of Event Requiring Statement (Month/Day/Year) 10/19/2016		3. Issuer Name and Ticker or Tra BIOCEPT INC [ BIOC					
(Last) (First) (Middle) UNIT 3002-3004,30TH FLR,GLOUCESTER TOWER THE LANDMARK, 15 QUEENS ROAD CENTRAL					Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director X 10% Owner     Officer (give title below)     Director Defends the open of the content of the cont			If Amendment, Date of Original Filed (Month/Day/Year)      Individual or Joint/Group Filing (Check Applicable Line)		
(Street) HONG KONG								Form filed by One Reporting Person  X Form filed by More than One Reporting Person		
(City)	(State)	(Zip)								
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock <sup>(1)(2)</sup>					1,681,000	D				
		(			ve Securities Beneficially ants, options, convertible		s)			
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise	e Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
		Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)			
Warrant <sup>(1)(2)</sup>			(3)	(4)	Common Stock	1,681,000	1.1	D		
1. Name and Add Ally Bridge		g Person <sup>*</sup> Care Master Fu	ınd Ltd							
		(Midd R,GLOUCESTER EENS ROAD CE	TOWER							
(Street)										
(City)	(State)	(Zip)								
1. Name and Address of Reporting Person* Ally Bridge LB Management Ltd										
(Last)	(First)	(Mido	lle)	_						

THE LANDMARK,15 QUEENS ROAD CENTRAL							
(Street) HONG KO	NG						
(City)	(State)	(Zip)					
1. Name and Address of Reporting Person*							
<u>Li Bin</u>							
(Last)	(First)	(Middle)					
UNIT 3002-3004,30TH FLR,GLOUCESTER TOWER							
THE LANDMARK,15 QUEENS ROAD CENTRAL							
(Street)							
HONG KO	NG						
(City)	(State)	(Zip)					

## **Explanation of Responses:**

- 1. Ally Bridge LB Healthcare Master Fund Limited (the "Master Fund") directly holds the Common Stock and Warrant. Ally Bridge LB Management Limited ("LB Management") owns the sole voting share of the Master Fund. Mr. Fan Yu and Mr. Bin Li are the shareholders and directors of LB Management, by virtue of it being the holder of the sole voting share of the Master Fund, and each of Mr. Yu and Mr. Li, by virtue of being a shareholder and director of LB Management, may be deemed to have voting control and investment discretion over the shares held by the Master Fund. Each of LB Management, Mr. Yu and Mr. Li disclaims beneficial ownership of such securities, except to the extent of their pecuniary interest therein, if any. This Form 3 shall not be deemed an admission that any of them are the beneficial owners of, or have any pecuniary interest in, such securities for any purposes.
- 2. (Continued from Footnote 1) By virtue of the transactions described in that certain statement on Schedule 13D filed on October 20, 2016, by the Reporting Persons, pursuant to Section 13(d)(3) of the Securities Exchange Act of 1934 (the "Exchange Act"), the Reporting Persons may, based on facts described elsewhere in the Schedule 13D, be considered to be a "group"; however, neither the filing of this Form 3 nor any of its contents shall be deemed to constitute an admission by such persons that such a group exists.
- 3. The Warrants are exercisable at any time after their original issuance.
- 4. The Warrants will expire five years from the date of their original issuance.

## Remarks:

 Ally Bridge LB Healthcare
 10/24/2016

 Master Fund Limited, /s/ Bin
 10/24/2016

 Li, Director
 10/24/2016

 Ally Bridge LB Management
 10/24/2016

 Limited, /s/ Bin Li, Director
 10/24/2016

 /s/ Fan Yu
 10/24/2016

 \*\* 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 5 (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.