Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0									
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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*				2. Issuer Name and Ticker or Trading Symbol Tarsus Pharmaceuticals, Inc. [TARS]							(Ch	Relationship neck all appl X Direct	•					
(Last)	`	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/22/2023							Office below	(give title		Other (s below)	pecify		
C/O TARSUS PHARMACEUTICALS, INC. 15440 LAGUNA CANYON ROAD, SUITE 160				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) IRVINE CA 92618													Form filed by More than One Reporting Person					
(City)	(Si	ate) (Zip)			Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contra satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction												
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Trans Date (Month)				Execution Date,		Transact	Transaction Dispose Code (Instr. 5)		rities Acquired (A) or ed Of (D) (Instr. 3, 4 and		Securiti Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		Direct Endirect Etr. 4)	7. Nature of Indirect Beneficial Ownership Instr. 4)			
						Code	v	Amount (A) or (D)		r Price	Transac	Transaction(s) (Instr. 3 and 4)			(III3ti. 4)			
		Ta							uired, Dis s, options					y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	ed n Date,	4. Transaction of Code (Instr. 8) Sex Acq (A) Dispose of (Instr. 1) Code (Instr. 2) Code (Inst		5. Number 6. I		6. Date Exer Expiration D	. Date Exercisable and Expiration Date (Month/DaylYear)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly D	1.0. Dwnership Form: Direct (D) Or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		iration e	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$17.99	06/22/2023			A		5,000		(1)	06/2	21/2033	Common Stock	5,000	\$0	5,000		D	
Restricted Stock Units	(2)	06/22/2023			A		3,350		(3)		(3)	Common Stock	3,350	\$0	3,350		D	

Explanation of Responses:

- 1. Annual option granted in connection with the Reporting Person's service as a non-employee director as of the Company's 2023 annual meeting of stockholders. The option will vest in full on the one-year anniversary of the date of grant, subject to the non-employee director's continuous service.
- $2.\ Each\ Restricted\ Stock\ Unit\ ("RSU")\ represents\ a\ contingent\ right\ to\ receive\ one\ share\ of\ the\ Company's\ common\ stock.$
- 3. RSUs granted on June 22, 2023, in connection with the Reporting Person's service as a non-employee director as of the Company's 2023 annual meeting of stockholders. The RSUs vest in full on the oneyear anniversary of the date of grant, subject to the non-employee director's continuous service.

Remarks:

/s/ Jeffrey Farrow, Attorney-in-06/26/2023 **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.