FORM 3

FHMLS IX, L.L.C.

(Last)

(First)

(Middle)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-0104 OMB Number: Estimated average burden hours per response: 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

			f the Investment Company		1934				
1. Name and Address of Reporting Person Frazier Life Sciences IX, L.P	I Requiring Statement		3. Issuer Name and Ticker or Trading Symbol Tarsus Pharmaceuticals, Inc. [TARS]						
(Last) (First) (Middle) 601 UNION STREET, SUITE 3200		.020	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) SEATTLE WA 98101 (City) (State) (Zip)	_		Officer (give title below)	(specify	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person				
	Table I - No	on-Deriva	tive Securities Bene	eficially Ov	vned	<u> </u>			
1. Title of Security (Instr. 4)		2. Amount of Securities Beneficially Owned (Instr. 4) 3. Owners: Form: Direction (D) or India (I) (Instr. 5)		ership Direct Indirect	4. Nature of Indirect Beneficial Ownership (Instr. 5)				
(e			e Securities Benefic ants, options, conve						
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. Conver or Exer Price of	cise	ise Form:	6. Nature of Indirect Beneficial	
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivat Securit	ive	Direct (D) or Indirect (I) (Instr. 5)	Ownership (Instr. 5)	
Series B Preferred Stock	(1)	(1)	Common Stock	1,390,376	(1)		D ⁽²⁾		
Series C Preferred Stock	(3)	(3)	Common Stock	214,281	(3)		D ⁽²⁾		
1. Name and Address of Reporting Person Frazier Life Sciences IX, L.P									
(Last) (First) (601 UNION STREET, SUITE 3200	Middle)								
(Street) SEATTLE WA	98101								
(City) (State) (Zip)								
Name and Address of Reporting Person FHMLS IX, L.P.	k								
(Last) (First) (601 UNION STREET, SUITE 3200	Middle)								
(Street) SEATTLE WA	98101								
(City) (State) (Zip)								
1. Name and Address of Reporting Person	*								

601 UNION STREET, SUITE 3200							
(Street) SEATTLE	WA	98101					
(City)	(State)	(Zip)					
Name and Address of Reporting Person* Topper James N							
(Last) 601 UNION S	(First) (Middle) TREET, SUITE 3200						
(Street) SEATTLE	WA	92101					
(City)	(State)	(Zip)					
Name and Address of Reporting Person* Heron Patrick J							
(Last) 601 UNION S	(First) (Middle) NION STREET, SUITE 3200						
(Street) SEATTLE	WA	98101					
(City)	(State)	(Zip)					

Explanation of Responses:

- 1. The Series B Preferred Stock shall automatically convert into shares of Common Stock, on a one-for-one basis, immediately prior to the closing of the Issuer's initial public offering. The Series B Preferred Stock has no expiration date.
- 2. The shares are held directly by Frazier Life Sciences IX, L.P. ("FLS LP"). The general partner of FLS LP is FHMLS IX, L.P., and the general partner of FHMLS IX, L.P. is FHMLS IX, LLC. James Topper and Patrick Heron are the sole managing members of FHMLS IX, LLC, and share voting and dispositive power over the shares held by FLS LP. Each of Dr. Topper, Mr. Heron, FHMLS IX, L.P. and FHMLS IX, LLC disclaim beneficial ownership of the shares held by FLS LP, except to the extent of their pecuniary interest therein
- 3. The Series C Preferred Stock shall automatically convert into shares of Common Stock, on a one-for-one basis, immediately prior to the completion of the Issuer's initial public offering. The Series C Preferred Stock has no expiration date.

Remarks:

/s/ James N. Topper, as Managing Director of FHMLS IX, L.L.C., the general partner of FHMLS 10/15/2020 IX, L.P., the general partner of Frazier Life Sciences IX, L.P. /s/ James N. Topper, as Managing Director of FHMLS IX, L.L.C., the 10/15/2020 general partner of FHMLS IX, L.P. /s/ James N. Topper, as 10/15/2020 **Managing Director** /s/ James N. Topper 10/15/2020 10/15/2020 /s/ Patrick J. Heron ** Signature of Reporting Date Person

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 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.