FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF	CHANGES	IN	BENEFICIAL	OWNERSHIP
SIAILMLINI	OI.	CHANGES	11.4	DENEI ICIAL	CAMINETONIE

OMB APPROVAL									
OMB Number:	3235-0287								
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hours per response:	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* Farrow Jeffrey S (Last) (First) (Middle)					3. D	2. Issuer Name and Ticker or Trading Symbol Tarsus Pharmaceuticals, Inc. [TARS] 3. Date of Earliest Transaction (Month/Day/Year) 03/07/2024							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) See Remarks				
C/O TARSUS PHARMACEUTICALS, INC.				4 If	If Amendment, Date of Original Filed (Month/Day/Year)						6 Ir	6. Individual or Joint/Group Filing (Check Applicable					
15440 LAGUNA CANYON ROAD, SUITE 160				- '''	and the content of the content						Line	Line) X Form filed by One Reporting Person					
(Street) IRVINE	C	A	92618										_	led by Mor		One Repor	
(City)	(City) (State) (Zip)				Ru	Rule 10b5-1(c) Transaction Indication											
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			Beneficia Owned F	es Form ally (D) o following (I) (In		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
							Code V	Amour	t (A) or (D)	Price	Reported Transact (Instr. 3 a	saction(s) : 3 and 4)			(Instr. 4)		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		Date,	4. Transaction Code (Instr. 8)		ı of		6. Date Exercisable and Expiration Date (Month/Day/Year)		of Securit Underlyin Derivative	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$35.5	03/07/2024			A		47,500		(1)	03/06/203	Common Stock	47,500	\$0	47,500)	D	
Restricted Stock Units	(2)	03/07/2024			A		32,079		(3)	(3)	Common Stock	32,079	\$0	32,079)	D	

Explanation of Responses:

- 1. 25% of the option shares shall vest on March 7, 2025, and 1/48th of the option shares shall vest each month thereafter for a period of 3 years subject to the Reporting Person's continuous service.
- 2. Each Restricted Stock Unit ("RSU") represents a contingent right to receive one share of the Issuer's common stock.
- 3. 25% of the RSUs will vest on March 15th of each of 2025, 2026, 2027, and 2028, subject to the Reporting Person's continuous service.

Remarks:

Chief Financial Officer and Chief Strategy Officer

/s/ Jeffrey Farrow, Attorney-in-

03/11/2024

<u>Fact</u>

** 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.