FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Inchrication 4/h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

.(0). 0.	e instruction																		
Name and Address of Reporting Person* Welgus Howard G.					2. Issuer Name and Ticker or Trading Symbol Arcutis Biotherapeutics, Inc. [ARQT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
weigus Howard G.												1	Direc	tor		10% Ov	vner		
														Officer (give title below)			Other (s	specify	
(Last)	,	,	Middle)	,	3. Date of Earliest Transaction (Month/Day/Year) 10/01/2024									DEIOV	v)		below)		
C/O ARCUTIS BIOTHERAPEUTICS, INC.					10/01/2027														
3027 TOWNSGATE ROAD, SUITE 300																			
-					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)														ine)		£11 b O			
WESTL	AKE C	۸ ۵	1361											1		filed by One		Ü	
VILLAGE CA 91361														Perso	filed by Mo	re tna	in One Repo	orting	
(City)	(Si	tate) (2	Zip)																
(- 3)					<u> </u>														
		Table	I - N	on-Deriva	tive S	Secui	rities	Ac	quire	d, Di	sposed of	, or E	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yo					Execution Da		on Dat	Date, Transaction Code (Instr.		ction	4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			and 5) Securi Benef			Forn (D) c	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 10/01/202)24				S ⁽¹⁾		10,000	D	\$9.261	616(2)		181,944		D	
		Tal	hla II	- Derivati	vo Sc	curit	ios /	\car	uirod	Dier	oced of	or Bo	noficia	llv C	Jwno	۸	_		
		Idi	DIE II								convertib)WIIE	u			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu if any		Transaction Code (Instr. 8) Secu Acqu (A) o Dispr of (D							7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sec	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y O F D o (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. The transaction reported in this Form 4 were effected pursuant to a 10b5-1 trading plan adopted by the Reporting Person.
- 2. The price reported in Column 4 is a weighted average sale price. The shares were sold in multiple transactions at prices ranging from \$9.22 to \$9.4138, inclusive. The Reporting Person hereby undertakes to provide to the Securities and Exchange Commission staff, the Issuer, or a security holder of the Issuer, upon request, full information regarding the number of shares sold at each respective price within the range set forth in this footnote.

Remarks:

/s/ David Topper, as Attorneyin-Fact for Howard G. Welgus

10/03/2024

** Signature of Reporting 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 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.