FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden 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).

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 10b5-

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(c). Se	ee Instruction 1	0.																	
	nd Address of la Masaru	Reporting Person*	,								g Symbol <u>Inc.</u> [AR(QT]		Check	all app	o of Reportin licable) tor er (give title	ng Per	son(s) to Is 10% Ov Other (s	vner
(Last) (First) (Middle) C/O ARCUTIS BIOTHERAPEUTICS, INC. 3027 TOWNSGATE ROAD, SUITE 300			3. Date of Earliest Transaction (Month/Day/Year) 11/04/2024								below) See Remarks								
	(Street) WESTLAKE VILLAGE CA 91361			4. If Amendment, Date of Original Filed (Month/Day/Year)						5. Individual or Joint/Group Filing (Check Applicable ine) Form filed by One Reporting Person Form filed by More than One Reporting Person					on				
(City)	(St	ate) (Ž	Zip)																
		Table	I - N	lon-Deriva	tive S	Secui	rities	Ac	quire	ed, Di	sposed of	f, or E	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			Execution Date,					Acquired (A) or (D) (Instr. 3, 4 a		and 5) Secur Benef Owne		rities For		: Direct r Indirect str. 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 11/04/2			11/04/202)24				S	Ħ	5,015(1)	D	\$8.68	42(2)	17	178,273		D		
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)	Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any					5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 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 Exe	e rcisable	Expiration Date	Title	or Number of Shares						

Explanation of Responses:

- 1. The sale was made pursuant to the Issuer's mandatory sell-to-cover requirements implemented to satisfy the tax withholding obligations associated with the vesting of the Reporting Person's Restricted Stock Units ("RSUs").
- 2. The price reported in Column 4 is a weighted average sale price. The shares were sold in multiple transactions at prices ranging from \$8.32 to \$8.86, 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

Reporting Person's title: Senior Vice President General Counsel and Corporate Secretary

/s/ David Topper, as Attorneyin-Fact for Masaru Matsuda 11/05/2024

** Signature of Reporting Person Da

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.