# FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Davidson Matt						2. Issuer Name <b>and</b> Ticker or Trading Symbol  Verrica Pharmaceuticals Inc. [ VRCA ]									all app Direc		g Pers	10% C	wner	
(Last) (First) (Middle) C/O VERRICA PHARMACEUTICALS INC. 10 NORTH HIGH STREET, SUITE 200					3. Date of Earliest Transaction (Month/Day/Year) 08/07/2019									belov	er (give title w)		below)	(specify		
(Street) WEST CHESTE			.9380 Zip)		4. If <i>i</i>	Amenc	dment,	Date o	of Original Filed (Month/Day/Year)					6. Indiv Line) X	, ·					
		Tabl	e I - No	on-Deriv	ative	Secu	ıritie	s Ac	quired	, Dis	sposed o	f, or B	enefi	cially	Owne	ed				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day					Execution Date,		3. 4. Securitie Transaction Code (Instr. 8)					and 5) Secu Bene Own		icially d Following	Form	nership : Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Pric	е		saction(s) : 3 and 4)			(Instr. 4)	
Common Stock 08/07/2					019			S <sup>(1)</sup>		422	D	\$10	).28 <sup>(2)</sup>	2,5	,584,072		D			
Common Stock 08/08/20					019		S <sup>(1)</sup>		3,118	D	\$10	).76 <sup>(3)</sup>	2,5	2,580,954		D				
Common Stock 08/09/2				2019	019		S <sup>(1)</sup>		2,773	D	\$10	).21 <sup>(4)</sup>	2,5	2,578,181		D				
		(e.g., pu	4. Transac Code (II 8)	alls, warrants,		Date Exercisable and (Month/Day/Year)  Date Exercisable and Expiration Date (Month/Day/Year)					8. Properties of the second se	Owned  8. Price of Derivative Security Instr. 5)  9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)		Or For Or (I)	o. wmership orm: irect (D) Indirect I (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

### **Explanation of Responses:**

- 1. These sales were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on June 22, 2018.
- 2. The price reported is a weighted average sales price. The shares were sold in multiple transactions at prices ranging from \$10.07 to \$10.53, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer or the staff of the Securities Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 3. The price reported is a weighted average sales price. The shares were sold in multiple transactions at prices ranging from \$10.48 to \$11.30, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer or the staff of the Securities Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 4. The price reported is a weighted average sales price. The shares were sold in multiple transactions at prices ranging from \$10.00 to \$10.72, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer or the staff of the Securities Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in

### Remarks:

/s/ Mark Ballantyne, Attorneyin-Fact

08/09/2019

\*\* 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.