FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | Washington, D.O | . 20010 | |
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| | | | |
| STATEMENT | OF CHANGES IN E | BENEFICIAL | OWNERSHIP |

| OMB APPROVAL | | | | | | | |
|----------------------|-----------|--|--|--|--|--|--|
| | | | | | | | |
| OMB Number: | 3235-0287 | | | | | | |
| Estimated average bu | rden | | | | | | |
| 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 10b5-1(c). See Instruction 10

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

| Instruc | uon ro. | | | | | | | | | | | | | | | | | |
|--|------------------------|----------------|-----------------|---|--|-----------------|---|---|-------------|---------------------|---------------------------------|--|------------------------------------|--|---------------------------------------|--------------------|--------|--|
| Name and Address of Reporting Person* Haves Christopher G. | | | | | 2. Issuer Name and Ticker or Trading Symbol Verrica Pharmaceuticals Inc. [VRCA] | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
| <u> 11ayes (</u> | CIII IStopii | CI U. | | | | | | | | | - | | Direct | | | 10% Ov | | |
| (Last) | /E | (rot) | (Middle) | − <u> </u> _ | | | | | | | | _ | Officer below: | (give title | | Other (s below) | pecify | |
| (Last) (First) (Middle) C/O VERRICA PHARMACEUTICALS INC. | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/09/2024 | | | | | | CHIEF LEGAL OFFICER | | | | | | | | |
| | | REET, SUITE 40 | | | | | | | | | | | | | | | | |
| 44 WES | I UAI SII | EE1, 5011E 40 | 0 | | | | | | | | | | | | | | | |
| (Street) | | | | — 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| WEST | P/ | Λ. | 19380 | | | | | | | | | | ▼ Form | filed by One | Repo | orting Person | n | |
| CHESTE | ER 11 | • | 17500 | | | | | | | | | | Form f | | e than | One Repor | ting | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac | | | | | | | | | | 5. Amou | | | | 7. Nature | | | | |
| Date (Month/D | | | | ay/Year) Execution Date, if any (Month/Day/Year | | Code (Instr. 5) | | d Of (D) (Ins | tr. 3, 4 an | Benefici Owned I | ally Following | (D) o | or Indirect nstr. 4) | of Indirect Beneficial Ownership | | | | |
| | | | | | | Code | v | Amount | t (A) or P | | Reporte Transac (Instr. 3 | ction(s) | | | (Instr. 4) | | | |
| | | | | | | | | | | | | | | | | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of 2. 3. Transaction 3A. Deemed 4. | | | | | | | | 6. Date Exercisable and 7. Title and Amo | | | | 8. Price of | 9. Number of | | 10. | 11. Nature | | |
| | | | | ransaction of ode (Instr. Derivative | | | Expiration Date of Securities (Month/Day/Year) Underlying | | | | Derivative Security | derivative Securities | | Ownership Form: | of Indirect Beneficial | | | |
| (Instr. 3) | Price of Derivative | (, | (Month/Day/Year | | Securities Acquired | | | , | -, | Derivative | Security | (Instr. 5) | Beneficially Owned Following | | Direct (D) or Indirect (I) (Instr. 4) | Ownership | | |
| | Security | | | | | (A) or | - 1 | (Instr. 3 and 4) | | | iu 4) | | | | | (111501.4) | | |
| | | | | | Disposed of (D) (Instr. 3, 4 and 5) | | | | | | | | Reported Transaction(s) | | | | | |
| | | | | | | | | | | Ι. | 4 | (Instr. 4) | | | | | | |
| | | | | | | | | | | | | Amount or | | | | | | |
| | | | | | | | ΙI | Date | | xpiration | | Number of | | | | | | |
| | | | | Code | ٧ | (A) | (D) | Exercisabl | | ate | Title | Shares | | | | | | |
| Employee Stock | 61.2 0 | 10/00/2024 | | | | 50,000 | | (1) | | 0/00/2024 | Common | 50,000 | | 50.00 | | | | |
| Option (right to buy) | \$1.28 | 10/09/2024 | | A | | 50,000 | | (1) | 1 | 0/09/2034 | Stock | 30,000 | \$0 | 50,000 | ٧ | D | | |
| | | | | | | | | | | | L | | 1 | | | | | |

Explanation of Responses:

1. 50% of the total shares subject to the option shall vest on each of April 9, 2025 and October 9, 2025, subject to the Reporting Person's continuous service through such vesting date.

/s/ Mark Ballantyne, Attorney-

in-Fact

** Signature of Reporting Person Date

10/11/2024

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.