FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

			2. Issuer Name and Ticker or Trading Symbol Pelthos Therapeutics Inc. [PTHS]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last)	(First)	(Middle)		X	Officer (give title below)	Other (specify below)		
C/O PELTHOS THERAPEUTICS INC. 4020 STIRRUP CREEK DRIVE, SUITE 110		2.	3. Date of Earliest Transaction (Month/Day/Year) 07/02/2025		Chief Commercial Officer			
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)		dual or Joint/Group Filing (C	,		
DURHAM	NC	27703		X	Form filed by One Reporti Form filed by More than C	0		
(City)	(State)	(Zip)						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

	Date	Execution Date,	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr.	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	3 and 4)		(1150. 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Ir 8)		Derivative Securities (Month/Day/Year) Securities Underlying Derivative Securities (Month/Day/Year) Securities Underlying Derivative Security (I 3 and 4) CD) (D) (Instr. 3, 4 and 5) Date Expiration Amountain Security (I 3 and 4) Numi		Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v			Amount or Number of Shares		Transaction(s) (Instr. 4)					
Restricted Stock Units	\$13.5	07/02/2025		Α		30,518		07/02/2026 ⁽¹⁾	07/02/2035	Common Stock	30,518	(1)	30,518	D	
Stock Option	\$13.5	07/02/2025		Α		93,000		07/02/2026 ⁽²⁾	07/02/2035	Common Stock	93,000	(2)	93,000	D	

Explanation of Responses:

1. On July 2, 2025, the Reporting Person was granted restricted stock units to purchase 30,518 shares of common stock at an exercise price of \$13.50 per share, with the initial one third (1/3) of such shares vesting on July 2, 2026, and in equal installments on a quarterly basis thereafter over a period of two (2) years.

2. On July 2, 2025, the Reporting Person was granted stock options to purchase 93,000 shares of common stock at an exercise price of \$13.50 per share, with the initial one third (1/3) of such shares vesting on July 2, 2026, and in equal installments on a quarterly basis thereafter over a period of two (2) years.

/s/ Sai .	<u>Rangarao</u>

** Signature of Reporting Person

07/21/2025 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.