FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

	Check this box if no longer subject
\Box	to Section 16. Form 4 or Form 5
\cup	obligations may continue. See
	Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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		, .				ilpaily Act c			_							
Name and Address of Reporting Person* Kerrick Michelle C.						2. Issuer Name and Ticker or Trading Symbol Beauty Health Co [SKIN]								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
IXELLICK MICHELLE C.						, , ,								-	X Direc	ctor		10% Ov	vner		
(Last)	Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 07/07/2023									Offic belov	er (give title v)		Other (s below)	specify		
C/O THI	Δ If Δr	4. If Amendment, Date of Original Filed (Month/Day/Year)								6 1	6. Individual or Joint/Group Filing (Check Applicable										
2165 SPRING STREET						4. II Amendment, Date of Original Flied (Month/Day/Teal)									Line)						
2100 01											X Form filed by One Reporting Person										
(Street) LONG BEACH CA 90806															Form filed by More than One Reporting Person						
LONG	DITION OF		0000		Dule	Dula 10hE 1(a) Transaction Indication															
					Rule 10b5-1(c) Transaction Indication																
(City)	(City) (State) (Zip)					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Table	l - No	n-Deriva	tive S	ecui	rities	Acq	uired,	Disp	osed of	f, or	Ben	eficia	lly Owi	ned					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)					Executio			Date,	3. Transaction Code (Instr. 8) 4. Securiti Disposed and 5)						5. Amo Securi Benefi Owned Follow	icially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A (D) or	Price		ted action(s) 3 and 4)					
Class A C	2023				J ⁽¹⁾		6,779		\ (1)	(1)	38,229		I	D							
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
						, -	1	,	_			_				I		_	I		
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		Secu Acqu (A) o Disp of (D	vative crities cired r osed)	Expiration	e Exercisable and ation Date h/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and) [B. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Di or (I)	0. wnership orm: irect (D) r Indirect) (Instr. 4)	Beneficial Ownership t (Instr. 4)			
					Code	v	(A)	(D)	Date Expiration Date Date Title Shai		nber										

${\bf Explanation\ of\ Responses:}$

1. The reported securities were received in a distribution by LCP Edge Holdco LLC in respect of the reporting person's membership interest in LCP Edge Holdco LLC.

Remarks:

/s/ Michelle C. Kerrick 07/07/2023

** 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.