FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

l	OMB APPROVAL								
	OMB Number:	3235-02							

87 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).

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. Name and Address of Reporting Person* SCHIFF ANDREW N						2. Issuer Name and Ticker or Trading Symbol Aclaris Therapeutics, Inc. [ACRS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
<u>SCHIF</u>	F ANDR	<u>EW N</u>				return incrupeutics, inc. [noto]							X Directo	or	10% Ov	vner	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/07/2018						\dashv	Officer below)	(give title	Other (s below)	specify		
C/O ACLARIS THERAPEUTICS, INC.						/0//2	018										
640 LEE ROAD, SUITE 200																	
						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street)													["	,	iled by One Re	oortina Persoi	า
		19087									Form filed by More than One Reporting						
										Person							
(City)	(S	tate)	(Zip)														
		Tal	ole I - Non-	-Deriva	ative	e Se	curities	Acc	uired, C	isp	osed of	f, or Ber	neficia	ly Owned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		Disposed	rities Acquired (A) o d Of (D) (Instr. 3, 4 a		Benefici Owned F	es Formally (D) (Following (I) (I	n: Direct or Indirect nstr. 4) (7. Nature of ndirect Beneficial Ownership
									Code	,	Amount	(A) or (D) Price		Transact	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
			Table II - D						ired, Dis					Owned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Dat if any (Month/Day/Yo		ransac ode (l		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				C	ode	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amoun or Numbe of Shares	1	(Instr. 4)		
Stock Option (right to buy)	\$18.35	06/07/2018			A		8,000 ⁽¹⁾		(2)	C	06/06/2028	Common Stock	8,000	\$0.00	8,000	D	

Explanation of Responses:

- 1. This grant was made pursuant to the issuer's non-employee director compensation policy.
- 2. The shares underlying this option vest in twelve equal monthly installments through June 7, 2019, subject to the reporting person's continuous service as of such vesting date.

Remarks:

/s/ Brian F. Leaf, Attorney-in-

06/08/2018

Fact

** Signature of Reporting Person

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.