FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

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

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* <u>Tullman Stephen A.</u>				2. Issuer Name and Ticker or Trading Symbol Aclaris Therapeutics, Inc. [ACRS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
												X Directo	r	10% Ow		Owner			
	LARIS THI	ERAPEUTICS, 1				3. Date of Earliest Transaction (Month/Day/Year) 10/13/2015								Officer below)	Officer (give title below)		Other (sp below)		
101 LINDENWOOD DRIVE, SUITE 400				4	4. If Amendment, Date of Original Filed (Month/Day/Year)							6 Ir	6. Individual or Joint/Group Filing (Check Applicable						
						modeling back of original rines (months bay) real)							Line	Line)					
(Street) MALVE	RN PA	A	19355												led by M		orting Pers		
(City)	(S	tate)	(Zip)																
		Tal	ole I - No	on-Der	ivativ	e Se	curi	ties Ac	quired	l, Dis	sposed o	f, or Ber	neficiall	y Owned					
1. Title of Security (Instr. 3) 2. Trans. Date (Month/I			Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquidisposed Of (D) (6)				Securities Beneficially		Form: Direct India (D) or Indirect Ben (I) (Instr. 4) Owr		. Nature of ndirect Beneficial Ownership Instr. 4)						
								Code	v	Amount	(A) or (D)	Price	Transaction (Instr. 3 and		(ins		msu. 4)		
Common Stock 10/13.			3/2015	.015		С		46,188(1)	A	(2)	394,0	14	4 I		By Trust ⁽³⁾				
Common Stock											521,7	39			By NeXeption, LLC ⁽⁴⁾				
			Table II								osed of, convertib			Owned			<u> </u>		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transa Code (8)	ansaction Derivative Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership t (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4				
Series A Preferred Stock	(2)	10/13/2015			С			110,000	(2)		(2)	Common Stock	31,884	\$0.00	C)	I	By Trust ⁽³⁾	
Series B Preferred Stock	(2)	10/13/2015			С			31,913	(2)		(2)	Common Stock	9,250	\$0.00	C	0 I		By Trust ⁽³⁾	
Series C Preferred Stock	(2)	10/13/2015			С			17,437	(2)		(2)	Common Stock	5,054	\$0.00	C)	I	By Trust ⁽³⁾	

Explanation of Responses:

- 1. The total represents shares received upon conversion of shares of Series A Preferred Stock, Series B Preferred Stock and Series C Preferred Stock.
- 2. Effective upon the closing of the issuer's initial public offering of its common stock, each share of preferred stock automatically converted into 0.289855 shares of common stock. The preferred stock had no expiration date.
- 3. These shares are held by the 2007 Irrevocable Trust of Stephen A. Tullman, for which Mr. Tullman's spouse serves as the trustee.
- 4. These shares are held by NeXeption, LLC, of which Mr. Tullman is the Manager.

Remarks:

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

10/13/2015

fact

** 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.