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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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Form filed by One Reporting Person Form filed by More than One Reporting

Instruction	1(b).		Filed	pursuant to Section 16(a) of the Securities Exchange Act of 1934		L		
				or Section 30(h) of the Investment Company Act of 1940				
1. Name and Address of Reporting Person [*] Shanler Stuart				2. Issuer Name and Ticker or Trading Symbol Aclaris Therapeutics, Inc. [ACRS]			rson(s) to Issuer 10% Owner Other (specify	
	Last) (First) (Middle) C/O ACLARIS THERAPEUTICS, INC. 101 LINDENWOOD DRIVE, SUITE 400			3. Date of Earliest Transaction (Month/Day/Year) 02/01/2018	Chief Scientific Officer			
		·		2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Iss (Check all applicable) Aclaris Therapeutics, Inc. [ACRS] 5. Relationship of Reporting Person(s) to Iss (Check all applicable) Joirector 10% Ov X Officer (give title below) 3. Date of Earliest Transaction (Month/Day/Year) 5. Relationship of Reporting Person(s) to Iss (Check all applicable)				

(City)	(State)	(Zip)		
(Street) MALVERN	PA	19355		

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

Table 1 Non Derivative Occurrice Abquireu, Disposed of, of Derivitiany Office										
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)	ction	Disposed Of	Owned Following (I) (Instr. 4) Reported		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(insu. 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. Transa Code (8)		of		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) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock option (right to buy)	\$22.09	02/01/2018		A		54,000		(1)	01/31/2028	Common Stock	54,000	\$0.00	54,000	D	
Restricted stock units	(2)	02/01/2018		А		15,500		(3)	(3)	Common Stock	15,500	\$0.00	15,500	D	

Explanation of Responses:

1. The option will vest over a period of four years, with 25% of the shares underlying the option vesting on the first, second, third and fourth anniversaries of the date of grant.

2. Each restricted stock unit represents a contingent right to receive one share of common stock of the issuer.

3. The shares underlying these restricted stock units vest in four equal annual installments beginning on February 1, 2019, subject to the reporting person's continuous service with the issuer as of the applicable vesting date.

Remarks:

/s/ Brian F. Leaf, Attorney-infact

02/05/2018

** Signature of Reporting Person Date

x

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.