SEC For	m 4																		
FORM 4 UNITI				NITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549												OMB APPROVAL			
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 OWNER Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940												Numbe ated av	erage burden	3235-0287 0.5	
1. Name and Address of Reporting Person <sup>*</sup> Manion Douglas J.					2. Issuer Name and Ticker or Trading Symbol Aclaris Therapeutics, Inc. [ ACRS ]									k all applica Director	able)	,		ner	
(Last) (First) C/O ACLARIS THERAPEUTICS, 640 LEE ROAD, SUITE 200			(Middle) INC.		3. Date of Earliest Transaction (Month/Day/Year) 02/01/2023								X	Officer ( below)	r (give title ) Pres and Cl		Other (s below) EO	pecify	
(Street) WAYNE PA			19087	4	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line) X	Form fil Form fil	ed by One	t/Group Filing (Check Appl I by One Reporting Person I by More than One Reporti			
(City) (State)			(Zip)										Person						
		Та	ble I - Non-	Derivat	ive Se	ecurities	s Ac	quire	l, Di	isposed c	of, or B	enefic	ally	Owned					
1. Title of Security (Instr. 3)			2. Transa Date (Month/E			2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.		on Dispose				Beneficia	urities eficially ned Following		: Direct I Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Cod	• V	Amount	(A) (D)	or Pr	rice	Transacti (Instr. 3 a	on(s)			instr. 4)		
			Table II - D (e	erivativ .g., put	e Sec s, cal	curities Is, warr	Acq ants	uired, s, optic	Dis ons,	posed of converti	, or Be ble sec	neficia curitie	ally C s)	)wned					
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/Ye	Code	action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirati (Month/	on Da		of Securities			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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amor or Numl of Sh	ber		(Instr. 4)				
Employee Stock Option (Right to Buy)	\$16.97	02/01/2023		А		378,000		(1)		01/31/2033	Common Stock	<sup>1</sup> 378,	,000	\$0.00	378,000		D		

Explanation of Responses:

(2)

1. Exercisable with respect to 25% of the shares subject to the option vesting in four equal installments on the first, second, third and fourth anniversaries of January 1, 2023, subject to the Continuous Service of the Reporting Person (as defined in the Plan) as of each such date.

(3)

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 installments on the first, second, third and fourth anniversaries of January 1, 2023, subject to the Continuous Service of the Reporting Person (as defined in the Plan) as of each such date.

## **Remarks:**

Restricted

Stock Units

## /s/ Mark Ballantyne, Attorneyin-Fact

02/03/2023

108,000

D

\*\* Signature of Reporting Person Date

108,000

\$0.00

Commor

Stock

(3)

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).

02/01/2023

\*\* 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.

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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.

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