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).
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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

OMB APPROVAL					
OMB Number:	3235-0287				
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ours per response:	0.5
orting Porcon(s) to Issuer	

1. Name and Address of Reporting Person [*] RA CAPITAL MANAGEMENT, LLC				2. Issuer Name and Ticker or Trading Symbol Aclaris Therapeutics, Inc. [ACRS]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner Officer (give title Other (specify below) below)									
(Last) (First) (Middle) C/O RA CAPITAL MANAGEMENT, LLC 20 PARK PLAZA, SUITE 1200				3. Date of Earliest Transaction (Month/Day/Year) 10/22/2015															
20 PARK	CPLAZA, 3	SUITE 1200			4. If	Amer	ndment	, Date	of Origi	nal Fil	ed (Month/Da	ay/Year)		6. Indi Line)	vidual c	r Joint/Grou	up Fili	ing (Check /	Applicable
(Street)	N M	A ()2116											Form filed by One Reporting Person X Form filed by More than One Reporting Person					
(City)	(Si	ate) (Zip)																
		Tabl	e I - N	lon-Deriv	vative	Sec	uritie	es Ac	quire	d, Di	isposed o	of, or B	enefic	ially	Owne	ed	_		
1. Title of S	Security (Inst	ir. 3)		2. Transact Date (Month/Day		Exec if any	Deemed ecution Date, ny onth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Disposed Of	Acquired (A) or f (D) (Instr. 3, 4 ar		d 5) Secur Benef Owne		cially d Following	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common	Stock			10/22/2	015				Р		5,410	A	\$14.0	264	2,32	0,352 ⁽¹⁾			See Footnote ⁽²⁾
		Ta	ble II								oosed of, convertib				wned				
Derivative Conversion Date Ex Security or Exercise (Month/Day/Year) if a		if any	1	4. Transa	4. Transaction Code (Instr.		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. F Der Sec (Ins	rice of ivative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						
		Reporting Person [*] IANAGEME	<u>NT, I</u>	<u>.LC</u>															
(Last) (First) (Middle) C/O RA CAPITAL MANAGEMENT, LLC																			
20 PARK	K PLAZA, S	SUITE 1200																	
(Street) BOSTO	N	MA	02	2116															
(City)		(State)	(Z	ip)															
	nd Address of <u>nsky Pete</u>	Reporting Person [*] <u>I</u>																	
(Last)(First)(Middle)C/O RA CAPITAL MANAGEMENT, LLC20 PARK PLAZA, SUITE 1200																			
(Street) BOSTO	N	МА	02	2116															
(City)		(State)	(Z	ip)		_													
		Reporting Person [*] thcare Fund I	<u>.P</u>																

(Last)	(First)	(Middle)

C/O RA CAPITAL MANAGEMENT, LLC

20 PARK PLAZA, SUITE 1200							
(Street) BOSTON	МА	02116					
(City)	(State)	(Zip)					

Explanation of Responses:

1. The reported securities are owned by RA Capital Healthcare Fund, L.P. (the "Fund") and an account owned by Blackwell Partners, LLC (the "Blackwell Account"). Following the reported transactions, the Fund held 1,941,757 shares and the Blackwell Account held 378,595 shares. RA Capital Management, LLC (the "Adviser") is the general partner of the Fund and the investment adviser of the Blackwell Account. Peter Kolchinsky is the sole manager of the Adviser. In their respective capacities, each of Mr. Kolchinsky and the Adviser may be deemed to beneficially own the reported securities for purposes of Section 13(d) of the Exchange Act.

2. The Adviser and Mr. Kolchinsky disclaim beneficial ownership of the reported securities for purposes of Rule 16a-1(a)(1) under the Exchange Act in reliance on Rule 16a-1(a)(1)(v) and (vii), respectively, and therefore disclaim any obligation to report ownership of or transactions in the reported securities under Section 16a of the Exchange Act. The filing of this Form 4 shall not be construed as an admission that either the Adviser or Mr. Kolchinsky is or was, for purposes of Section 16 of the Securities Exchange Act of 1934, the beneficial owner of any of the securities reported herein.

<u>/s/ Peter Kolchinsky, Manager</u> <u>of RA Capital Management,</u> LLC	<u>10/26/2015</u>
<u>/s/ Peter Kolchinsky,</u> individually	<u>10/26/2015</u>
<u>/s/ Peter Kolchinsky, Manager</u> of RA Capital Management, LLC, the General Partner of RA Capital Healthcare Fund, L.P.	<u>10/26/2015</u>
<u>L.P.</u> ** 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.