

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL	
OMB Number:	3235-0287
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1. Name and Address of Reporting Person* <u>Molineaux Christopher P.</u> (Last) (First) (Middle) <u>C/O ACLARIS THERAPEUTICS, INC.</u> <u>640 LEE ROAD, SUITE 200</u> (Street) <u>WAYNE PA 19087</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Aclaris Therapeutics, Inc. [ACRS]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>03/20/2018</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	03/20/2018		M		1,993	A	\$0.41	9,598	D	
Common Stock	03/20/2018		M		120	A	\$0.72	9,718	D	
Common Stock	03/20/2018		M		264	A	\$1.52	9,982	D	

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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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
Stock option (right to buy)	\$0.41	03/20/2018		M			1,993	(1)	01/28/2024	Common Stock	1,993	\$0.00	0	D	
Stock option (right to buy)	\$0.72	03/20/2018		M			120	(2)	08/12/2024	Common Stock	120	\$0.00	51	D	
Stock option (right to buy)	\$1.52	03/20/2018		M			264	(3)	12/07/2024	Common Stock	264	\$0.00	198	D	

Explanation of Responses:

- 25% of the shares underlying this option vested on January 29, 2015 and the remaining shares vest in 36 equal monthly installments thereafter, subject to the reporting person's continued service with the Issuer as of the applicable vesting date.
- 25% of the shares underlying this option vested on August 13, 2015 and the remaining shares vest in 36 equal monthly installments thereafter, subject to the reporting person's continued service with the Issuer as of the applicable vesting date.
- 25% of the shares underlying this option vested on December 8, 2015 and the remaining shares vest in 36 equal monthly installments thereafter, subject to the reporting person's continued service with the Issuer as of the applicable vesting date.

Remarks:

/s/ Brian F. Leaf, attorney-in-fact 03/22/2018

** 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.