Edgar Filing: Shanler Stuart - Form 4

Shanler Stua	rt										
Form 4	2010										
February 05,									OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								3235-0287			
Check this box							Expires:	January 31,			
if no longer subject to Section 16. Form 4 or						NERSHIP OF	Estimated a burden hou	ted average hours per			
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(c). Form 5 obligations may continue. See Instruction 1(c). Form 5 obligations may continue. See Instruction 1(c). Form 5 obligations May continue. See Instruction 1(c). Form 5 Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 (C). Section 1(c). Section 1(c).								0.5			
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> Shanler Stuart			2. Issuer Name and Ticker or Trading Symbol Aclaris Therapeutics, Inc. [ACRS]				0	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Check				k all applicable)				
(M			(Month/D	(Month/Day/Year) 02/01/2019				Director 10% Owner X Officer (give title Other (specify below) below) Chief Scientific Officer			
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 						
WAYNE, P	A 19087							Person		porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ities Acc	uired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution I any (Month/Day/Year)		on Date, if				Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial			
G				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			
Common Stock	02/01/2019			М	3,875	А	<u>(1)</u>	273,355	D		
Common Stock	02/01/2019			F(2)	1,308	D	\$ 6.96	272,047	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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)	Code	Transaction of Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	(1)	02/01/2019		М	3,875	(3)	(3)	Common Stock	3,875	\$

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Shanler Stuart C/O ACLARIS THERAPEUTICS, INC. 640 LEE ROAD, SUITE 200 WAYNE, PA 19087			Chief Scientific Officer				
Signatures							
/s/ Mark Ballantyne,							

Attorney-in-fact 02/05/2019

**Signature of Reporting Person

Date

Explanation of Responses:

* 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).

- (1) Restricted stock units convert into common stock on a one-for-one basis.
- (2) The transaction reported represents the withholding of shares by the issuer to satisfy the reporting person's tax withholding obligations in connection with the vesting and settlement of the restricted stock units being reported in this Form 4.
- (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.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.