FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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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

1. Name and Address of Reporting Person* HILL MATTHEW C (Last) (First) (Middle) C/O STRATA SKIN SCIENCES, INC. 100 LAKESIDE DRIVE, SUITE 100 (Street) HORSHAM PA 19044 (City) (State) (Zip)					3. D 06/	2. Issuer Name and Ticker or Trading Symbol STRATA Skin Sciences, Inc. [SSKN] 3. Date of Earliest Transaction (Month/Day/Year) 06/14/2018 4. If Amendment, Date of Original Filed (Month/Day/Year)									6. II	X Officer (give title Oth below) CFO addividual or Joint/Group Filing (Chec			o Owner er (specify w) Applicable	
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				action	ction 2A. Deemed Execution Date,			3. Transa	3. 4. Securi Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3,		A) or	5. Am Secur Benef Owne Repor Trans	ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	of Indirect			
	mmon Stoc				I/2018	+				P P		3,646 4,542	+	A A	\$1.9°	\$1.97 3,646 D				
	SKN Common Stock 06/14/									P		1,812			\$1.9	_	0,000	D		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Ta 3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	e.g., pued Date, hy/Year)		action	5. Wa of De Se Ac (A) Dis of (In	Numberivation of the curitic countries of the curitic curitic countries of the curitic countries of the curitic curiti	ber (ive (ies ed ed 8, 4		s, CC kercis n Date ay/Yea	able and	7. Titl Amou Secur Under Derive	e and int of ities lying ative ity (Ins	es)	Owned Price of lerivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)	

Explanation of Responses:

/s/ Matthew C. Hill

06/14/2018

** 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.