FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washir

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

gton, D.C. 20549	OMB APPROVAL

OMB Number: 32	235-028 <sup>-</sup>
Estimated average burden	
hours per response:	0.9

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

							. ,				· •										
Name and Address of Reporting Person*						2. Issuer Name <b>and</b> Ticker or Trading Symbol STRATA Skin Sciences, Inc. [ SSKN ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Via LuAnn</u>					1-	DITUITI DAIN DEICHCES, INC. [ SORT									X	Direc	ctor	or 10		wner	
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)										Officer (give title below)			Other below)	(specify	
` ′	`	,	•		06/	06/08/2018											,		,		
C/O STRATA SKIN SCIENCES, INC.																					
100 LAK	ESIDE DR	IVE, STE. 100			4 16	A 16 Assessment Data of Opinion I Filed (Adoptin ID 1977)									C. Individual or Joint/Croup Filips (Chook Assissable						
,					.   4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)															X Form filed by One Reporting Person						
HORSH	AM PA	. 1	19044												Form filed by More than One Reporting						
-																Pers	011				
(City)	(St	ate) (	Zip)																		
		Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	eficia	ally (	Owne	ed				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D.					Day/Year) if a		A. Deemed Execution Date, f any Month/Day/Year)		Code (	Transaction Dispo		rities Acquired (A ed Of (D) (Instr. 3,			4 and Sec Bei Ow		ecurities eneficially wned Following		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		Reported Transaction(s) (Instr. 3 and 4)				(111501. 4)	
SSKN Common Stock 06/08/					06/08/2018				P		5,000		A	\$2		5,000		I	)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
			(	e.g., pı	uts, c	alls	, warr	ants,	option	s, co	onvertib	le s	ecurit	ies)							
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Tr Security or Exercise (Month/Day/Year) if any Co				4. Transa Code ( 8)			ative rities ired osed	Expiration	5. Date Exercisable and Expiration Date Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	m: ect (D) ndirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
		Code	v	(A)		Date Exercisal		Expiration Date	Title	or Nun of	ount nber res	ber									

**Explanation of Responses:** 

/s/ LuAnn Via

06/11/2018

\*\* Signature of Reporting Person

Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).