FORM 4

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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response:	0.5								

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

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1. Name and Address of Reporting Person*  NAVARRO SAMUEL E						2. Issuer Name and Ticker or Trading Symbol STRATA Skin Sciences, Inc. [ SSKN ]									(Che	5. Relationship of Reporting Person(s) (Check all applicable)  X Director 10				vner	
(Last) C/O STF	`	irst) I SCIENCES, IN	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 10/09/2020									-	Officer	Officer (give title below)		Other (s		
5 WALNUT GROVE DRIVE, SUITE 140							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street) HORSHAM PA 19044															X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																		
		Tak	ole I - Nor	n-Deriv	ative	e Se	curit	ies Ac	quire	d, Di	isp	osed o	f, or B	ene	ficiall	y Owned					
1. Title of Security (Instr. 3)  2. Transc Date (Month/L						Execution Date,			`   c₀	Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr. 5)						Form (D) o	n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
										de V		Amount (A) or (D) Pr		Price	Transaci (Instr. 3	tion(s)			(Instr. 4)		
SSKN Common Stock 10/0					9/202	)/2020			N			15,000 A			\$1.29	66	66,136		D		
		•	Table II -									sed of, onvertil				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, T	ransaction Code (Instr.		of		Expira	6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	V	(A)	(D)	Date Exerci	sable		kpiration ate	Title	or Nu of	umber						
STRATA Skin Non- Qualified Stock Option (Option to Buy)	\$1.29	10/09/2020			М			15,000	12/01	2018	12	2/01/2027	SSKN Common Stock	15	5,000	\$0	0		D		

**Explanation of Responses:** 

/s/ Samuel E. Navarro

10/13/2020

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.