The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

OMB APPROVAL OMB Number: Estimated average burden hours per response:

Notice of Exempt Offering of Securities

1. Issuer's Identity			
CIK (Filer ID Number)	Previous Names	X None	Entity Type
0001492422			X Corporation
Name of Issuer			Limited Partnership
Apellis Pharmaceuticals, Inc.			
Jurisdiction of Incorporation/	Organization		Limited Liability Company
DELAWARE			General Partnership
Year of Incorporation/Organiz	zation		Business Trust
X Over Five Years Ago			Other (Specify)
Within Last Five Years (S	Specify Vear)		
	specify real)		
Yet to Be Formed			
2. Principal Place of Busine	ess and Contact Information		
Name of Issuer			
Apellis Pharmaceuticals, Inc.			
Street Address 1		Street Address 2	
6400 WESTWIND WAY		SUITE A	
City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer
CRESTWOOD	KENTUCKY	40014	502-241-4114
3. Related Persons			
Last Name	First Name		Middle Name
François	Cedric		
Street Address 1	Street Address 2		
6400 Westwind Way	Suite A		
City	State/Province/Co	untry	ZIP/PostalCode
Crestwood	KENTUCKY		40014
Relationship: X Executive C	Officer X Director Promoter		
Clarification of Response (if N	Necessary):		
Last Name	First Name		Middle Name
Deschatelets	Pascal		
Street Address 1	Street Address 2		
6400 Westwind Way	Suite A		
City	State/Province/Co	untry	ZIP/PostalCode
Crestwood	KENTUCKY		40014
Relationship: X Executive C	Officer Director Promoter		
Clarification of Response (if N	lecessary):		
Last Name	First Name		Middle Name
Dunlop	A.		Sinclair
Street Address 1	Street Address 2		
7910 Woodmont Avenue	Suite 1210		

City	State/Province/Country	ZIP/PostalCode	
Bethesda	MARYLAND	20814	
Relationship: Executive Offi	icer X Director Promoter		
Clarification of Response (if Neo	cessary):		
Last Name	First Name	Middle Name	
Machiels	Alec	Middle Name	
Street Address 1	Street Address 2		
6400 Westwind Way	Suite A		
City	State/Province/Country	ZIP/PostalCode	
Crestwood	KENTUCKY	40014	
	icer X Director Promoter		
Clarification of Response (if Neo	cessary):		
Last Name	First Name	Middle Name	
Chan	Gerald		
Street Address 1	Street Address 2		
1188 Centre Street			
City	State/Province/Country	ZIP/PostalCode	
Newton	MASSACHUSETTS	02459	
Relationship: Executive Offi	icer X Director Promoter		
Clarification of Response (if Neo	cessary):		
Last Name	First Name	Middle Name	
O'Brien	Stephanie		
Street Address 1	Street Address 2		
1188 Centre Street			
City	State/Province/Country	ZIP/PostalCode	
Newton	MASSACHUSETTS	02459	
Relationship: Executive Offi	icer X Director Promoter		
Clarification of Response (if Neo			
Last Name	First Name	Middle Name	
		Middle Name	
Grossi Street Address 1	Federico Street Address 2		
6400 Westwind Way	Suite A		
City	State/Province/Country	ZIP/PostalCode	
Crestwood	KENTUCKY	40014	
Relationship: X Executive Offi		40014	
Clarification of Response (if New			
Last Name	First Name	Middle Name	
Geffken	Daniel		
Street Address 1	Street Address 2		
6400 Westwind Way	Suite A	710/0 / 10 /	
City	State/Province/Country	ZIP/PostalCode	
Crestwood	KENTUCKY	40014	
Relationship: X Executive Offi	icer Director Promoter		
Clarification of Response (if Neo	cessary):		
Last Name	First Name	Middle Name	
Perry	Nicole		
Street Address 1	Street Address 2		

6400 Westwind Way	Suite A		
City	State/Province/Country	ZIP/PostalCode	
Crestwood	KENTUCKY	40014	
Relationship: X Executive Office	er Director Promoter		
Clarification of Response (if Nece	essary):		
Last Name	First Name	Middle Name	
Watson	David		
Street Address 1	Street Address 2		
6400 Westwind Way	Suite A		
City	State/Province/Country	ZIP/PostalCode	
Crestwood	KENTUCKY	40014	
Relationship: X Executive Office	er Director Promoter		
Clarification of Response (if Nece	essary):		
Last Name	First Name	Middle Name	
Chen	Bihua		
Street Address 1	Street Address 2		
200 Clarendon Street	52nd Floor		
City	State/Province/Country	ZIP/PostalCode	
Boston	MASSACHUSETTS	02116	
Relationship: Executive Office	er X Director Promoter		
Clarification of Response (if Nece	essary):		
Last Name	First Name	Middle Name	
Adelman	Robert		
Street Address 1	Street Address 2		
1700 Owens Street	#530		
City	State/Province/Country	ZIP/PostalCode	
San Francisco	CALIFORNIA	94158	
Relationship: Executive Office	er X Director Promoter		
—— Clarification of Response (if Nece	essary):		
4. Industry Group			

Agriculture	Health Care Retailing
Banking & Financial Services	Biotechnology
Commercial Banking	Health Insurance Technology
Insurance	Hospitals & Physicians Computers
Investing	
Investment Banking	X Pharmaceuticals Telecommunications
Pooled Investment Fund	Other Health Care Other Technology
Is the issuer registered as an investment company under	Manufacturing Travel
the Investment Company	Real Estate Airports
Act of 1940?	Commercial Lodging & Conventions
YesNo	Construction Tourism & Travel Services
Other Banking & Financial Services	REITS & Finance Other Travel
Business Services	Residential
Energy	Other
Coal Mining	Other Real Estate
Electric Utilities	
Energy Conservation	
Environmental Services	
Oil & Gas	
Other Energy	
5. Issuer Size	
Revenue Range OR	Aggregate Net Asset Value Range
No Revenues	No Aggregate Net Asset Value
\$1 - \$1,000,000	\$1 - \$5,000,000
\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000 \$25,000,001 -	\$25,000,001 - \$50,000,000
\$100,000,000	\$50,000,001 - \$100,000,000
Over \$100,000,000	Over \$100,000,000
X Decline to Disclose	Decline to Disclose
Not Applicable	Not Applicable
6. Federal Exemption(s) and Exclusion(s) Cla	imed (select all that apply)
	_
	Investment Company Act Section 3(c)
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1) Section 3(c)(9)
Rule 504 (b)(1)(i)	Section 3(c)(2) Section 3(c)(10)
Rule 504 (b)(1)(ii)	Section 3(c)(3) Section 3(c)(11)
Rule 504 (b)(1)(iii)	
Rule 505	Section 3(c)(4) Section 3(c)(12)
X Rule 506(b) Rule 506(c)	Section 3(c)(5) Section 3(c)(13)
Securities Act Section 4(a)(5)	Section 3(c)(6) Section 3(c)(14)
	Section 3(c)(7)
7. Type of Filing	
X New Notice Date of First Sale 2015-12-24	First Sale Yet to Occur

Amendment		
8. Duration of Offering		
Does the Issuer intend this offering to last more than one year?	Yes X No	
9. Type(s) of Securities Offered (select all that apply)		
Equity Debt Option, Warrant or Other Right to Acquire Another Security Security to be Acquired Upon Exercise of Option, Warrant or ORight to Acquire Security	Pooled Investment Fund Interests Tenant-in-Common Securities Mineral Property Securities Other (describe)	
10. Business Combination Transaction		
Is this offering being made in connection with a business combina merger, acquisition or exchange offer?	tion transaction, such as a Yes X No	
Clarification of Response (if Necessary):		
11. Minimum Investment		
Minimum investment accepted from any outside investor $\$0$ USD		
12. Sales Compensation		
Recipient (Associated) Broker or Dealer X None Street Address 1 City State(s) of Solicitation (select all that apply) Check "All States" or check individual States	Recipient CRD Number X None (Associated) Broker or Dealer CRD Number X None Street Address 2 State/Province/Country Foreign/non-US	ZIP/Postal Code
13. Offering and Sales Amounts		
Total Offering Amount \$47,135,951 USD or Indefinite Total Amount Sold \$47,135,951 USD Total Remaining to be Sold \$0 USD or Indefinite Clarification of Response (if Necessary):		
14. Investors		
Select if securities in the offering have been or may be sold to enter the number of such non-accredited investors who already Regardless of whether securities in the offering have been or r investors, enter the total number of investors who already have	y have invested in the offering. may be sold to persons who do not qualify as accredited	7
15. Sales Commissions & Finder's Fees Expenses		
Provide separately the amounts of sales commissions and finders estimate and check the box next to the amount.	fees expenses, if any. If the amount of an expenditure is no	ot known, provide an
Sales Commissions \$0 USD Estimate		
Finders' Fees \$0 USD Estimate		
Clarification of Response (if Necessary):		
16. Use of Proceeds		

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD	Estimate	,

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Apellis Pharmaceuticals, Inc.	/s/ Cedric Francois	Cedric Francois	Chief Executive Officer	2016-01-29

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.

^{*} This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.