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 n to Section 16. Forr obligations may co Instruction 1(b).	n 4 or Form 5	• • • • • • • • • • • • • • • • • • • •	PUT OF CHANGES IN BENEFICIAL OWN pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940		OMB Number: Estimated average hours per response:			
1. Name and Address Grossi Federic (Last) C/O APELLIS PH 100 FIFTH AVEN	O (First) IARMACEUTIC	(Middle)	2. Issuer Name and Ticker or Trading Symbol <u>Apellis Pharmaceuticals, Inc.</u> [APLS] 3. Date of Earliest Transaction (Month/Day/Year) 07/14/2021	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) CHIEF MEDICAL OFFICER				
· · · · · · · · · · · · · · · · · · ·	MA (State) Tabl	02451 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line) X Form filed Form filed Person	nt/Group Filing (Che by One Reporting F by More than One	Person		
	Tab	ie i - Non-Deriva	live Securities Acquired, Disposed of, or Bener	icially Owned				

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)	ction	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially	Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
	Code		v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(
Common Stock	07/14/2021		S ⁽¹⁾		500	D	\$64.68	63,180	D	

	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)	4. Transa Code (8)	5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. This is a scheduled sale from 10B5-1 trading plan.

/s/ David Watson, attorney-in-07/15/2021 fact for Dr. Federico Grossi

** 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.