SEC Form 4	
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## FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL
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Filed pursuant to Section 16(a) of the Securities Exchan or Section 30(h) of the Investment Company Act	

			or Section So(n) of the investment Company Act of 1940					
1. Name and Address of Reporting Person <sup>*</sup> Townsend Adam J. (Last) (First) (Middle) C/O APELLIS PHARMACEUTICALS, INC. 100 FIFTH AVENUE, 3RD FLOOR			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Apellis Pharmaceuticals, Inc.</u> [ APLS ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
			3. Date of Earliest Transaction (Month/Day/Year) 04/03/2023	X Chief (give the below) Chief Commercial Officer				
			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				
WALTHAM	MA	02451		Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Rule 10b5-1(c) Transaction Indication					
			$\begin{tabular}{ c c c c c } \hline X & Check this box to indicate that a transaction was made pursuant satisfy the affirmative defense conditions of Rule 10b5-1(c). See \end{tabular}$	to a contract, instruction or written plan that is intended to Instruction 10.				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								

Table 1- Non-Derivative Securities Acquired, Disposed 01, 01 Denencially Owned										
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 5)			5. Amount of Securities Beneficially Owned Following Reported	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	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	04/03/2023		M <sup>(1)</sup>		5,000	Α	\$15.09	80,995	D	
Common Stock	04/03/2023		<b>S</b> <sup>(1)</sup>		5,000	D	\$74.05	75,995	D	

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction Date	3A. Deemed Execution Date.	4. Transa	ction	5. N of	umber			8. Price of Derivative	9. Number of derivative	10. Ownership	11. Nature of Indirect		
Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Year)	if any (Month/Day/Year)	Code ( 8)		Deri Secu Acq (A) o Disp of (E	osed )) tr. 3, 4	(Month/Day/Year) Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Security (Instr. 5)	Securities Beneficially Owned	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$15.09	04/03/2023		M <sup>(1)</sup>			5,000	(2)	11/15/2028	Common Stock	5,000	\$0	287,500	D	

Explanation of Responses:

1. This is a scheduled exercise and sale from an established 10b5-1 plan.

2. This option was granted on November 16, 2018 and vests as to 25% of the shares underlying the options on the first anniversary of Mr. Townsend's date of hire, November 16, 2018, with the remaining 75% of the shares underlying the option vesting in equal monthly installments thereafter through the fourth anniversary of hire, subject to continued service.

's/ David	Watson, a	ttorney-in-	04/05/2022		
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fact for Adam Townsend

\*\* 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.