FORM 5

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OMB APPROVAL									
OMB Number:	3235-0362								
Estimated average	burden								
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U obliga	tion 16. Form 4 tions may contil ction 1(b).	or Form 5 nue. See	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP									Es	OMB Number: 3235-0362 Estimated average burden							
Form:	3 Holdings Rep	orted.				• • • • • • • • • • • • • • • • • • • •								ho	urs per r	esponse:	1.0			
Form	4 Transactions	Reported.	Filed	d pursuant to S or Section 3								.934								
1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol							elationship		orting Pe	erson(s) to	Issuer						
Machiels Alec			Apellis Pharmaceuticals, Inc. [APLS]						Ι,	(Check all applicable) X Director 10% Owner Officer (give title below) Other (specify below)										
(Last) (First) (Middle)				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2021											ar)					
C/O API	ELLIS PHA	RMACEUTIC	ALS, INC.	12/31/202	1															
100 FIF	ΓΗ AVENU	E, 3RD FLOO	R	4 If Amendr	4. If Amendment, Date of Original Filed (Month/Day/Year)							6 Ir	6. Individual or Joint/Group Filing (Check Applicable							
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(Street) WALTH	AM M.	Δ	02451											•		porting Pe				
	7 11V1 1V1												Form Perso		More tha	an One R	eporting			
(City)	(St	ate)	(Zip)																	
		Table	e I - Non-Deriva	ative Secur	ities	Acq	uire	ed, Dis	posed	of, o	r Bei	neficia	lly Own	ed						
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dispo Of (D) (Instr. 3, 4 and 5)			Disposed	5. Amount of Securities Beneficially Owned at end of		6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership					
							Amount (A)		(A) or (D)	Price	:e	Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I) (Instr. 4)		(Instr. 4)				
Common	Stock		07/22/2021			G ⁽¹)	160	,000	D	\$	\$0.00	00 259,54		00 259,544]	D		
Common	Stock												250,000		250,000		0 I See footnot		See ootnote ⁽²⁾	
Common	Stock								11,98		11,950		11,950 I		Gee ootnote ⁽³⁾					
Common	Stock												150,000				Gee ootnote ⁽⁴⁾			
		Та	ıble II - Derivat (e.g., pı	ive Securit uts, calls, v				, ·		,			y Owne	d						
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Security Or Exercise (Mon		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	າ of E>		6. Date Exercisable and Expiration Date (Month/Day/Year)			An Se Un De Se	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		per of ve ies ially ng ed etion(s)	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficia Ownersh (Instr. 4)			
					(A)	(D)	Date Exer	e rcisable	Expiration Date		or Nu of	umber								

Explanation of Responses:

- 1. On July 22, 2021, the reporting person transferred 160,000 shares of Apellis Pharmaceuticals, Inc. common stock to his spouse.
- 2. The shares are held by Bauhaus 1 LLC, which LLC is held by The Irrevocable Agreement of Trust of Alec Machiels (the "Trust"). The reporting person is the managing member of Bauhaus 1 LLC and the trustee of the Trust.
- 3. Owned by the spouse of the reporting person.
- 4. On September 7, 2021, the reporting person's spouse transferred 150,000 shares of Apellis Pharmaceuticals, Inc. common stock to her trust, of which the reporting person is the trustee.

Remarks:

/s/ David Watson, attorney-infact for Alec Machiels

02/10/2022

** 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.