FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average b	urden								
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 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Chan Gerald						2. Issuer Name and Ticker or Trading Symbol Apellis Pharmaceuticals, Inc. [APLS]								(Ch	elationship eck all appli	cable)	g Pers	son(s) to Iss		
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/01/2024							-		(give title		Other (s			
C/O APELLIS PHARMACEUTICALS, INC. 100 FIFTH AVENUE, 3RD FLOOR					4. If	If Amendment, Date of Original Filed (Month/Day/Year)								Line	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)			02451		-												filed by Moi		orting Person One Repo	
WALTH.	AM M	[A	02451		Ri	ıle	10b5-	1(c	Trai	ısac	tion	Ind	icatio							
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Tab	le I - Non	-Deriv	ative	Se	curitie	s Ac	quire	d, Di	spos	ed o	f, or B	ene	ficial	y Owned	d			
1. Title of Security (Instr. 3) 2. Trans Date (Month/li					action 2A. Deemed Execution Date if any (Month/Day/Ye		e, Transaction Dispose Code (Instr. 5)			rities Acquired (A) or ed Of (D) (Instr. 3, 4 a			Benefici Owned I	es Formially (D) (Following (I) (I		n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
										e v	Am	nount	(A) (D)	or	Price	Reporte Transac (Instr. 3	ction(s)			(Instr. 4)
Common Stock 01/0					1/2024	/2024)	3	3,341 A		\$ <mark>0</mark>	11,	,438		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. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Year		te	Amount of			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis		Expirat Date	ation	Title	or Nu of	umber					
Stock Option (Right to	\$59.86	01/01/2024			A		5,748		(2)		12/31/2	2030	Commor Stock	5	,748	\$59.86	5,748		D	

Explanation of Responses:

- 1. This restricted stock unit was granted on January 1, 2024. The restricted stock unit will fully vest on the first anniversary of the date of grant, subject to his continued service as a director, or upon later termination of his service as a director at his election.
- 2. This option was granted on January 1, 2024. The option vests quarterly on the last day of each quarter from the date of grant, subject to his continued service as a director and expires seven years after the date of grant.

/s/ David Watson, attorney-in-

fact for Gerald Chan

01/02/2024

** 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.