Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	C. 20549
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL						
OMB Number: 3235-0287						
Estimated average burden						
hours per response	: 0.5					

				or Section	30(11) 01 111	e ilives	uneni	Company Act	01 1940						
1. Name and Address of Reporting Person* <u>Francois Cedric</u>			2. Issuer Name and Ticker or Trading Symbol Apellis Pharmaceuticals, Inc. [APLS]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
			-							X Dire	ctor		10%	Owner	
(Last) (First) (Middle)				Date of Earliest Transaction (Month/Day/Year)					X Officer (give title below)			Other (specify below)			
C/O APELLIS PHARMACEUTICALS, INC.			07/15/2020				Chief Executive Officer								
100 FIFTH AVENUE, 3RD FLOOR															
(Street)				4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Individual or Joint/Group Filing (Check Applicable Line)						
WALTH	AM M	Α 0	2451								X Forr	n filed by	One Re	porting Pe	erson
													More that	an One R	eporting
(City)	(St	ate) (Z	Zip)								Pers	on			
		Table	I - Non-Deriva	ative Sec	urities A	cquir	ea, L	usposea c	of, or	Benefic	ially Owi	1ea			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Y	Execution Date		3. Transaction Code (Instr. 8) 4. Securities Acquir Disposed Of (D) (Ins		ed (A) or tr. 3, 4 and	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
			,	, ,	Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		, ,		(Instr. 4)	
Common Stock			07/15/202	20		S ⁽¹⁾		5,000	D	\$32.12	1,098	079	D		
Common Stock										234,411		I		ee ootnote ⁽²⁾⁽³⁾	
		Tal	ole II - Derivat	ive Secui	ities Acc	quire	d, Di	sposed of	, or B	eneficia	lly Owne	d			
			(e.g., pı	ıts, calls,	warrant	s, op	tions	, converti	ble se	curitie	s)				
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. Transactior Code (Instr. 8)		Expiration Date (Month/Day/Year)		Amo Secu Unde Deri	tle and unt of urities erlying vative urity (Instr. d 4)	Derivative Security (Instr. 5) E		Number of curivative courities peneficially whed or Incomplet of the court of the c		Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. This is a scheduled sale from 10B5-1 trading plan.
- 2. The securities are held by The Francois-DuBois Educational Trust (the "Trust"), for which Fiduciary Trust Company of New England serves as trustee. The reporting person disclaims beneficial ownership over the shares held by the Trust except to the extent of his pecuniary interest therein.

(D)

(A)

(Instr. 3, 4 and 5)

3. The securities are held by The Francois-DuBois Educational Trust (the "Trust"), for which the Fiduciary Trust Company of New England serves as trustee. The reporting person disclaims beneficial ownership over the shares held by the Trust except to the extent of his pecuniary interest therein.

Date Exercisable

Expiration Date

/s/ David Watson, attorney-in-07/16/2020 fact for Cedric François

(Instr. 4)

** Signature of Reporting Person Date

Amount Number

of Shares

Title

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).

Code

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.