FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549
-------------	------	-------

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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

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*     Nicholson Nur					2. Issuer Name and Ticker or Trading Symbol Apellis Pharmaceuticals, Inc. [ APLS ]									(Chec	k all app Direc	nship of Reporting Pers applicable) birector officer (give title elow) Chief Technical (		rson(s) to Is 10% O Other (	/ner	
(Last) (First) (Middle) C/O APELLIS PHARMACEUTICALS, INC. 100 FIFTH AVENUE, 3RD FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 01/20/2023								X	belov			below)		
(Street) WALTH	AM M	A 0	2451 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	Form Form	idual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benefi	cially	/ Own	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day			Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired Disposed Of (D) (Instr. 5)				, 4 and Secu Bene		ities Fo icially (D d Following (I)			7. Nature of Indirect Beneficial Ownership (Instr. 4)						
						Code	v	Amount	(A) (D)	or Pric	e	Transa	ction(s) 3 and 4)			(1130.1.4)				
Common Stock 01/20/2			2023		<b>F</b> <sup>(1)</sup>		2,034	D	\$5	2.05	.05 54,993			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)	if any	emed ion Date, //Day/Year)		saction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		nt			Ownersh Form: y Direct (D) or Indirect (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)			
					Code	Code V (A) (D)		Date Exercis	able	Expiration Date of Sha		of Shares								

## **Explanation of Responses:**

1. This represents shares withheld for tax on a restricted stock unit release.

/s/ David Watson, attorney-in-01/24/2023 fact for Nur Nicholson

\*\* 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.