SEC For	m 4 FORM	4	UNITE) STA	TES S	ECURITIE	S AN	DE	ХСНАМ	IGE CO	оммі	SSION					
						Washington, D.C. 20549								OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).					ed pursuar	E CHANGE It to Section 16(a) tion 30(h) of the) of the S	ecuriti	es Exchang		HIP	Estim	Number: ated average burd per response:	3235-0287 len 0.5			
1. Name and Address of Reporting Person [*] SCHEIBLER LUKAS						er Name and Tick lis Pharmac					ck all applic Directo	able) r (give title					
	(Last) (First) (Middle)C/O APELLIS PHARMACEUTICALS, INC.100 FIFTH AVENUE, 3RD FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 02/10/2022								below) NNOVATION OFFIC			
(Street) WALTHAM MA 02451					4. If Amendment, Date of Original Filed (Month/Day/Year)							 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting 					
(City)	(S	itate)	(Zip)			Persor											
		Tab	ole I - Nor	ו-Deri	vative S	ecurities Ac	quired,	Dis	posed of	, or Ben	eficially	y Owned					
1. Title of Security (Instr. 3) Date (Month/I			action Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year	3. Transa Code) 8)			es Acquired Of (D) (Instr				6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3	ion(s)		(Instr. 4)		
Common Stock				02/10)/2022		F ⁽¹⁾		678	D	\$47.12	2 53	,179	D			
Common Stock 02/10)/2022		M ⁽²⁾		10,000	Α	\$13.85	5 63	,179	D				
Common Stock 02/10/)/2022		S ⁽³⁾		10,000	D	\$50	53	,179	D				
						curities Acqu IIs, warrants						Owned					
1. Title of Derivative Security	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution	Date,		ransaction of Expiration Date (Month/Dav/Year) Underlying		s	8. Price of Derivative Security	9. Numbe derivative	e Ownershi	ip of Indirec					

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. Transaction Code (Instr. 8)		5. Number of Derivative 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 (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
	Stock Option (Right to Buy)	\$13.85	02/10/2022		M ⁽²⁾			10,000	(4)	02/07/2029	Common Stock	10,000	\$0	65,000	D		

Explanation of Responses:

1. This represents shares used to cover tax withholding on a Restricted Stock Unit release.

2. This is a scheduled exercise from 10B5-1 trading plan.

3. This is a scheduled sale from 10B5-1 trading plan.

4. This represents a stock option grant made on 02/08/2019 that vest as to 25% of the shares underlying the options on the first anniversary of the grant, with the remaining 75% of the shares underlying the options vesting in equal monthly installments thereafter through the fourth anniversary of the grant, subject to the satisfaction of a specified performance condition and continued service.

/s/ David Watson, attorney-in-02/11/2022 fact for Lukas Scheibler

** 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.