FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	20549	
vasilligion,	D.C.	20349	

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

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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* Sullivan Timothy Eugene						2. Issuer Name and Ticker or Trading Symbol Apellis Pharmaceuticals, Inc. [APLS]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O APELLIS PHARMACEUTICALS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 04/19/2023											belo	Other (specify lelow)		
100 FIFTH AVENUE, 3RD FLOOR						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	AM M	A 0	02451										X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(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 tl	ne affiri	mative	defens	e cond	itions of Rule 1	0b5-1(c)	. See Instru	uction 10.						
1 Title of 9	Security (Inst		I - No	on-Deriva		Secui 2A. De		Ac	quire	d, Di	sposed of			5. Amoun		6. Owr	nership	7. Na	ature of	
1. Title of Security (Instr. 3)			Date (Month/Day/Year)		Execution Date,			Transa Code (8)		Disposed Of (D) (Instr. 3			Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)		Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
Common	Common Stock		04/19/20	023				G		36,232	D	\$0.00	97,7	97,713		D				
Common Stock			04/19/2023					G		36,232	A	\$0.00	36,2	36,232		$I_{(1)}$		Indirect Owner (The Timothy E Sullivan Irrevocable Trust of 2023)		
		Tal	ble II								posed of, convertib				d					
1. Title of Derivative Security (Instr. 3) 2. Conversion of Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year)			Transaction of Code (Instr. Deriva		rative rities ired r osed)	Expir	Date Exercisable and piration Date onth/Day/Year)		7. Titl Amou Secur Under Derive Secur 3 and	nt of ities lying ative ity (Instr. 4)	8. Price of Derivative Security (Instr. 5)	9. Numb derivati Securiti Benefic Owned Followin Reporte Transac (Instr. 4)	ve es ially ng ed etion(s)	e Owners s Form: ally Direct (I or Indire g (I) (Instr		11. Nature of Indirect Beneficial Ownership (Instr. 4)				
		Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares										

Explanation of Responses:

1. On April 19, 2023, the reporting person transferred 36,232 shares to The Timothy E Sullivan Irrevocable Trust of 2023. Patrick O. Collins is the trustee of The Timothy E Sullivan Irrevocable Trust of 2023. The reporting person disclaims beneficial ownership over the shares held by The Timothy E Sullivan Irrevocable Trust of 2023 except to the extent of his pecuniary interest therein.

Remarks:

/s/ David Watson, attorney-infact for Timothy Sullivan

04/20/2023

** 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.