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FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 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

1. Title of Derivative	2. Conversion	3. Transactio Date		med on Date,	4. Transac			er 6. Date Exercisable and 7. Title and Expiration Date Amount of				8. Price of Derivative	9. Number derivative	of 10. Ownership	11. Nature of Indirect	
			Table II							posed of, convertib			Owned			
Common Stock 01/16/20			2024			S ⁽²⁾		1,632	D	\$66.808	6 1,12	21,918	D			
Common Stock 01/16			2024			A		6,743(1)	Α	\$ <mark>0</mark>	1,12	23,550	D			
						Code	v	Amount	(A) or (D)	Price	Turneration(a)			(1130.4)		
1. Title of Security (Instr. 3) (Month/Day			ction	ion 2A. Deemed Execution Date,			iction Instr.	4. Securities Disposed Of	I (A) or	or 5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
(Oly)	(3	,	Table I - N	on-Deri		satisfy the	e affirmative	e defense	condi	tions of Rule 10	0b5-1(c). S	ee Instructio	n 10.		plan that is intend	ed to
(City) (State) (Zip)				Rule 10b5-1(c) Transaction Indication												
(Last) (First) (Middle) C/O APELLIS PHARMACEUTICALS, INC. 100 FIFTH AVENUE, 3RD FLOOR (Street) WALTHAM MA 02451				-									filed by Mor	e Reporting Pers e than One Rep		
			4. lf /	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
				3. Date of Earliest Transaction (Month/Day/Year) 01/16/2024							below		below)	(specify		
1. Name and Address of Reporting Person [*] Deschatelets Pascal					2. Issuer Name and Ticker or Trading Symbol <u>Apellis Pharmaceuticals, Inc.</u> [APLS]								cable) or	g Person(s) to Is 10% C	wner	
					3							3				

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)	\$66.3	01/16/2024		A		9,805		(3)	01/15/2034	Common Stock	9,805	\$66.3	9,805	D		

Explanation of Responses:

1. This represents an award of Restricted Stock Units granted 01/16/2024 that vests annually from grant date over a four year period subject to continued service.

2. This represents shares sold to cover tax withholding on the Restricted Stock Units released on 01/12/2024.

3. This represents a stock option award granted 01/16/2024 that vests over a four year period. 25% vests one year from grant date and the remaining 75% vests monthly thereafter subject to continued service.

/s/ David Watson, attorney-in-

fact for Pascal Deschatelets

** 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.