FORM 4

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								
Estimated average burden									
hours per response:	0.5								

		Table I - Non-De	erivative Securities Acquired, Disposed of, or Ben	eficially	/ Owned	
(City)	(State)	(Zip)				
(Street) WALTHAM	MA	02451		Line)	Form filed by One R Form filed by More t Person	
			4. If Amendment, Date of Original Filed (Month/Day/Year)		vidual or Joint/Group F	iling (Check Applicable
C/O APELLIS 100 FIFTH AV		EUTICALS, INC. FLOOR	02/10/2022		CHIEF MEDICA	L OFFICER
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)	- x	below) CHIEF MEDICA	below)
1. Name and Addr Grossi Fede		g Person [*]	2. Issuer Name and Ticker or Trading Symbol <u>Apellis Pharmaceuticals, Inc.</u> [APLS]	(Chec	ationship of Reporting F k all applicable) Director Officer (give title	Person(s) to Issuer 10% Owner Other (specify
Instruction 1(b)).		Filed pursuant to Section 16(a) of the Securities Exchange Act of 19 or Section 30(h) of the Investment Company Act of 1940	34	hours per	response: 0.5

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)	ction	4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following	Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock	02/10/2022		F ⁽¹⁾		705	D	\$47.12	102,861	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Number tion of		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				

Explanation of Responses:

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

/s/ David Watson, attorney-in-02/11/2022 fact for Dr. Federico Grossi

** 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.