FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-0287										
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hours per respon	nse: 0.5									

obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* RENTON HOLLINGS						2. Issuer Name and Ticker or Trading Symbol ANAPTYSBIO, INC [ANAB]									5. Relationship of Reportin (Check all applicable) Director			on(s) to Iss		
(Last)	,	*	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/15/2024									Officer below)	(give title		Other (s below)	pecify	
C/O ANAPTYSBIO, INC. 10770 WATERIDGE CIRCLE, SUITE 210					4. l	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person					
(Street) SAN DII	Street) SAN DIEGO CA 92121												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 the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				2. Trans Date (Month		ar) l	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		n Dispo				Benefic Owned	es ally Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amou	nt	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 06/1				5/2024	/2024		M		3,9	3,900		\$0 ⁽¹	3,900			D				
Common Stock 06/18			8/2024	1			S ⁽²⁾	\perp	1,9	1,950		\$23.1	6 1,	950		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 I if any (Month/Day	Date,		ransaction ode (Instr.		n of E		Exerci on Da Day/Y		e and 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)] Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiratio Date		itle	Amount or Number of Shares						
Restricted Stock Unit	(1)	06/15/2024			M			3,900	(3)		(3)		ommon Stock	3,900	\$0	0		D		

Explanation of Responses:

- 1. Each restricted stock award ("RSU") represents a contingent right to receive 1 share of the Issuer's Common Stock upon settlement for no consideration.
- 2. The sale reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on March 14, 2024
- 3. The RSUs vests as to 100% of the total RSUs on the date of the Issuer's 2024 annual meeting of shareholders, subject to the Reporting Person's provision of service to the Issuer on each vesting date.

/s/ Eric Loumeau, Attorney-in-06/18/2024 **Fact**

** 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.