## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden hours per response: 0.5

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Instruction 10.  1. Name and Address of Reporting Person*  RENTON HOLLINGS				2. Issuer Name <b>and</b> Ticker or Trading Symbol ANAPTYSBIO, INC [ ANAB ]									(Che	elationship of the color of the	able)	g Pers	son(s) to Iss			
(Last) (First) (Middle) C/O ANAPTYSBIO, INC.				3. Date of Earliest Transaction (Month/Day/Year) 11/29/2024										Officer below)	(give title		Other (s below)	pecify		
10770 W	/ATERIDG	E CIRCLE, SUI	ΓE 210		4.	If Ame	endme	ent, Date o	of Or	riginal F	iled	(Month/Da	ay/Year)		6. In	dividual or	loint/Group	Filing	(Check App	olicable
(Street)	EGO C	A	92121		-	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	Form filed by One Rep Form filed by More that Person			•	
(City)	(S		(Zip)																	
			le I - Nor			1			÷	-	Disp		-			-				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.						Securitie Benefici Owned F	5. Amount of Securities Beneficially Owned Following		r Indirect rstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								-	Code	v	Amount	ount (A) or		Price	Reported Transaction(s) (Instr. 3 and 4)				(11150. 4)	
Common Stock 11/2			9/202	9/2024				M		10,00	) A		\$6.93	11	950		D			
Common	Common Stock 11/29			9/202	9/2024				S <sup>(1)</sup>		10,000 D		\$25	1,950		D				
		-	Γable II - ∣ )									sed of, onvertil				Owned				
Security or Exercise (Instr. 3) Price of	Conversion or Exercise Price of Derivative	se (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	d Date,	4. Transa	ransaction ode (Instr.		5. Number of		-	rcisa Date	ble and	7. Title and Al of Securities Underlying Derivative Se (Instr. 3 and 4		mount	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	i S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
						 			Date			xpiration		or Nu of	ımber					
					Code	٧	(A)	(D)	Exe	ercisable	D	ate	Title	Sh	ares					

### **Explanation of Responses:**

- 1. 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. Mr. Renton holds various stock options that are expiring in 2025 and wished to put the plan in place to facilitate the orderly exercise of such options before their expiration.
- 2. The stock option grant was issued on July 6, 2015, is fully vested and exercisable until its expiration date of July 5, 2025.
- 3. In addition to the remaining options to purchase 20,925 shares of common stock as set forth in Table II, the Reporting Person also holds additional options to purchase up to an aggregate of 95,541 shares of common stock, which options vest according to their terms.

/s/ Eric Loumeau, Attorney-in-

Fact

\*\* Signature of Reporting Person

Date

12/03/2024

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.