FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL									
OMB Number:	3235-0287								
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)

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*     Day Lucy					2. Issuer Name and Ticker or Trading Symbol AN2 Therapeutics, Inc. [ ANTX ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owne							
(Last)	,	First) PEUTICS, INC.	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/15/2024									below)	Officer (give title pelow)  Chief Fina		Other (s below) Officer			
1800 EL CAMINO REAL, SUITE D					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) MENLO	PARK (	CA	94027													iled by Mor		orting Persor			
(City)	(	State)	(Zip)		R	ule	10b5-	1(c)	Trans	acti	ion Ind	icatio	n								
											nction was n					n or written	plan th	at is intended	to		
		Tab	le I - Nor	n-Deriv	vativ	e Se	curities	s Ac	quired,	Dis	posed o	f, or E	Bene	ficiall	y Owned						
Da			Date	nth/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4			5. Amou Securitie Benefici Owned F Reported	es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A (D	) or )	Price	Transact (Instr. 3	tion(s)			(Instr. 4)		
Common Stock				03/1:	5/2024				A 27,50		)(1)	A	\$ <mark>0</mark>	30,0	30,627(2)		D				
		-	Table II -								osed of, onverti				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year) 3A. Deeme Execution if any (Month/Da	Date, Trans		iction Instr.	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 Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	s Blly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)			
				c	Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	OI N Of	umber							
Stock Option (right to	\$3	03/15/2024			A		55,000		(3)	C	03/14/2034	Commo		5,000	\$0	55,000	0	D			

## **Explanation of Responses:**

- 1. These restricted stock units vest as follows: 1/16th of the shares vests quarterly over four years from January 1, 2024, subject to the Reporting Person's continuous service as of such date.
- 2. Reflects the adjusted total which includes the purchase of 3,127 shares under the AN2 Therapeutics, Inc. 2022 Employee Stock Purchase Plan on March 31, 2023.
- 3. The shares subject to the option vest as follows: 1/48th of the shares vests monthly over four years from January 1, 2024, subject to the Reporting Person's continuous service as of such date.

/s/ Lucy Day

03/18/2024

\*\* Signature of Reporting Person

Date

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.