FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasnington,	D.C.	2054

1	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average b	ourden								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP || \_

	tion 1(b).	iuniue. See		Filed							rities Exchang ompany Act o		f 1934		<u> </u>	ours per r	response		0.5
1. Name and Address of Reporting Person*  Adjuvant Global Health Technology				2. Issuer Name and Ticker or Trading Symbol AN2 Therapeutics, Inc. [ ANTX ]  5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner															
					Date of Earliest Transaction (Month/Day/Year) 8/23/2023								Officer (give title Other (specify below) below)						
(Last) (First) (Middle) C/O ADJUVANT CAPITAL, L.P. 501 FIFTH AVENUE, SUITE 1404					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Chec Line)  Form filed by One Reporting Porting											Person		
(Street) NEW Y	ORK N	IY :	10017		Rul	ule 10b5-1(c) Transaction Indication													
(City)	(5	State) (	Zip)		Check this box to satisfy the affirm			his box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											
		Table	1 - N	on-Deriva	tive S	Secu	urities	Ac	quired	l, Di	sposed of	, or E	Benefi	icially Ow	ned				
Date		2. Transaction Date (Month/Day/	Execu (Year) if any		Deemed cution Date, ny nth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Disposed Of and 5)	Acquir (D) (Ins	ed (A) o str. 3, 4	r 5. Amount of Securities Beneficially Owned Followi Reported		Form: Direct		7. Natu Indired Benefi Owner	ct cial ship		
									Code	v	Amount	(A) or (D)	Price	Transac	Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common	Stock			09/13/20	)23				S <sup>(1)</sup>		336	D	\$1	6 2,17	7,547	D	D <sup>(2)</sup>		
Common	mmon Stock 09/		09/13/20	023	23		S <sup>(1)</sup>		64	D	\$1	6 411	411,893		I H		By Adjuvant Global Health Technology Fund DE, L.P.( <sup>(3)</sup>		
		Та	ble II								posed of, convertib				ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)		if any Co			saction of Derivative Securities (A) or Disposed of (D) (Instr. 3, 4 and 5)		vative irities iired r osed ) r. 3, 4	Expiration I (Month/Day			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price or Derivative Security (Instr. 5)		ive Ovices For Control of Control (I)  or (I)  ed ction(s)	10. Owners Form: Direct or Indii (I) (Inst	ship o (D) C rect (I	1. Nature of Indirect Beneficial Ownership Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amour or Number of Shares	er					
		of Reporting Person al Health Tech		g <u>y Fund,</u>	L.P.														
		(First) CAPITAL, L.P. UE, SUITE 1404	·	/liddle)															
(Street) NEW Y	ORK	NY	1	0017															
(City)		(State)	(Z	Zip)		-													
		of Reporting Person al Health Tech		g <u>y Fund l</u>	DE,														

(Middle)

10017

(Last)

**NEW YORK** 

(First)

NY

C/O ADJUVANT CAPITAL, L.P. 501 FIFTH AVENUE, SUITE 1404

I *								
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person*								
Adjuvant Capital GP, L.P.								
(Loot)	(Firet)	(Middle)						
(Last)	(First)	(Middle)						
C/O ADJUVANT CAPITAL, L.P.								
501 FIFTH AVENUE, SUITE 1404								
(Street)								
NEW YORK	NY	10017						
(City)	(State)	(Zip)						
1. Name and Address	of Reporting Person*							
Adjuvant Capital Management, LLC								
(Last)	(Last) (First) (Middle)							
C/O ADJUVANT CAPITAL, L.P.								
501 FIFTH AVENUE, SUITE 1404								
JOI FIFTH AVENUE, JUHE 1404								
(Street)								
NEW YORK	NY	10017						
-								
(City)	(State)	(Zip)						

## **Explanation of Responses:**

- 1. The reported transactions were effected pursuant to a Rule 10b5-1 trading plan adopted on December 8, 2022.
- 2. Shares held directly by Adjuvant Global Health Technology Fund, L.P. ("AGHT Fund"). The sole general partner of AGHT Fund is Adjuvant Capital GP, L.P. ("AC GP") and the sole general partner of AC GP is Adjuvant Capital Management, L.L.C. ("AC MGMT"). Kabeer Aziz, a member of the Issuer's board of directors, is Secretary of AC MGMT, and may be deemed to share voting and dispositive power over the securities held by such entities. Each such person and entity disclaims beneficial ownership of the securities, except to the extent of such person's or entity's pecuniary interest in such
- 3. Shares held directly by Adjuvant Global Health Technology Fund DE, L.P. ("AGHT Fund DE"). The sole general partner of AGHT Fund DE is AC GP and the sole general partner of AC GP is AC MGMT. Kabeer Aziz, a member of the Issuer's board of directors, is Secretary of AC MGMT, and may be deemed to share voting and dispositive power over the securities held by such entities. Each such person and entity disclaims beneficial ownership of the securities, except to the extent of such person's or entity's pecuniary interest in such securities.

Technology Fund, L.P., By: Adjuvant Capital GP, L.P., its sole general partner, By: Adjuvant Capital 09/15/2023 Management, L.L.C., its sole general partner, By: Kabeer Aziz, Secretary, /s/ Kabeer **Aziz** Adjuvant Global Health Technology Fund DE, L.P., By: Adjuvant Capital GP, L.P., its sole general partner, By: Adjuvant Capital 09/15/2023 Management, L.L.C., its sole general partner, By: Kabeer

Aziz, Secretary, /s/ Kabeer

Adjuvant Global Health

Aziz

Adjuvant Capital GP, L.P., By:

Adjuvant Capital

Management, L.L.C., its sole 09/15/2023

general partner, By: Kabeer

Aziz, Secretary, /s/ Kabeer

Aziz

Adjuvant Capital

Management, L.L.C., By:

Kabeer Aziz, Secretary, /s/

09/15/2023

Kabeer Aziz

\*\* 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.