FORM 4

Check this box if no Section 16. Form 4

obligations may con

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
or Form 5 tinue. See	

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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 1(b) 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer 1. Name and Address of Reporting Person (Check all applicable) AN2 Therapeutics, Inc. [ANTX] Chanda Sanjay Director 10% Owner Officer (give title Other (specify 3. Date of Earliest Transaction (Month/Day/Year) X below) below) (Last) (First) (Middle) 03/15/2024 Chief Development Officer C/O AN2 THERAPEUTICS, INC 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable 1800 EL CAMINO REAL, SUITE D Line) Form filed by One Reporting Person (Street) Form filed by More than One Reporting MENLO PARK CA 94027 Rule 10b5-1(c) Transaction Indication (City) (State) (Zip) 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 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 6. Ownership Form: Direct 2. Transaction 5. Amount of 7. Nature 1. Title of Security (Instr. 3) 3. Transaction **Execution Date** Securities of Indirect if any (Month/Day/Year) Beneficially Owned Following (Month/Day/Year) Code (Instr. 5) (D) or Indirect Beneficial 8) (I) (Instr. 4) Ownership Reported (Instr. 4) (A) or (D) Transaction(s) (Instr. 3 and 4) Code ν Amount Price Common Stock 03/15/2024 27,500(1) 28,235(2) A D Α Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 3. Transaction Date 3A. Deemed Execution Date. 6. Date Exercisable and Expiration Date 1. Title of 5. Number 7. Title and Amount 8. Price of Derivative 9. Number of 11. Nature Conversion Derivative Transaction of Securities derivative Ownership of Indirect or Exercise Price of Security (Instr. 3) (Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) Derivative (Month/Day/Year) Underlying Derivative Security Security (Instr. 5) Securitie Form: Direct (D) Beneficial Securities Acquired Beneficially Ownership Derivative (Instr. 3 and 4) Owned or Indirect (Instr. 4) (A) or Disposed of (D) (Instr. 3, 4 and 5) Security Following (I) (Instr. 4) Reported Transaction(s) (Instr. 4)

Explanation of Responses:

\$3

Stock Option (right to

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.

(A)

55,000

2. Reflects the adjusted total which includes the purchase of 735 shares under the AN2 Therapeutics, Inc. 2022 Employee Stock Purchase Plan on September 29, 2023.

Code

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

(D)

Exercisable

(3)

/s/ Lucy Day, Attorney-in-Fact 03/18/2024 for Sanjay Chanda

Amount Number

Shares

55,000

\$0

55,000

D

Expiration

03/14/2034

Date

Title

Stock

** 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).

03/15/2024

** 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.