FORM 3

### UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

#### OMB APPROVAL Washington, D.C. 20549 3235-0104 OMB Number:

Estimated average burden

hours per response: 0.5

### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

			on 16(a) of the Securities E of the Investment Compar			1934				
1. Name and Address of Reporting Person*  RA CAPITAL  MANAGEMENT, L.P.		e of Event ing Statemen n/Day/Year) ./2022	3. Issuer Name and Ticker or Trading Symbol AN2 Therapeutics, Inc. [ ANTX ]							
(Last) (First) (Middle)			Issuer	(Check all applicable)				5. If Amendment, Date of Original Filed (Month/Day/Year)		
200 BERKELEY STREET, 18TH FLOOR	· · · · · · · · · · · · · · · · · · ·		Director X 10% Owner  Officer (give title below) Dither (specify below)			6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person				
(Street) BOSTON MA 02116							<b>y</b>	Form filed	by More than One Person	
(City) (State) (Zip)										
	Table I - I	Non-Deriv	ative Securities Be	nefic	ially O	wned				
1. Title of Security (Instr. 4)		2. Amount of Securiting Beneficially Owned (III)			Direct ndirect	4. Nature of Indirect Benef Ownership (Instr. 5)				
			ive Securities Bene rants, options, con				)			
Title of Derivative Security (Instr. 4)	2. Date Exerc Expiration D (Month/Day/	ate		s. Title and Amount of Securities Underlying Derivative Security (Instr. )		4. Conversion or Exercise Price of		5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amou Numb Share	er of	Derivative Security		or Indirect (I) (Instr. 5)	3)	
Series B Preferred Stock	(1)	(1)	Common Stock	1,699	599,998 <sup>(2)</sup> (1)			I	See footnotes <sup>(2)</sup> (3)	
Series B Preferred Stock	(1)	(1)	Common Stock	299	,999(4)	(1)		I	See footnote <sup>(3)(4)</sup>	
1. Name and Address of Reporting Pers  RA CAPITAL MANAGEM  (Last) (First)  200 BERKELEY STREET, 18TH	MENT, L.P.									
BOSTON MA  (City) (State)	02116 (Zip)									
(Sing)	( <del>-</del> 'P)									

# 1. Name and Address of Reporting Person\*

## RA Capital Healthcare Fund LP

(First) (Middle) (Last) C/O RA CAPITAL MANAGEMENT, L.P. 200 BERKELEY STREET, 18TH FLOOR

(Street)

**BOSTON**  $\mathbf{M}\mathbf{A}$ 02116 (City) (State) (Zip)

1. Name and Address of Reporting Person\*

RA Capital	Nexus Fund	<u>l II, L.P.</u>					
(Last) (First) (Middle) C/O RA CAPITAL MANAGEMENT, L.P. 200 BERKELEY STREET, 18TH FLOOR							
(Street) BOSTON	MA	02116					
(City)	(State)	(Zip)					
Name and Address of Reporting Person*     Kolchinsky Peter							
(Last) (First) (Middle) C/O RA CAPITAL MANAGEMENT, L.P. 200 BERKELEY STREET, 18TH FLOOR							
(Street) BOSTON	MA	02116					
(City)	(State)	(Zip)					
Name and Address of Reporting Person*     Shah Rajeev M.							
(Last)	(First)	(Middle)					
C/O RA CAPITAL MANAGEMENT, L.P.							
200 BERKELEY STREET, 18TH FLOOR							
(Street) BOSTON	MA	02116					
(City)	(State)	(Zip)					

### ${\bf Explanation\ of\ Responses:}$

- 1. Each share of Series B Preferred Stock is convertible at the option of the holder and will automatically convert into one share of Common Stock of the Issuer upon the closing of the Issuer's initial public offering. The Series B Preferred Stock has no expiration date.
- 2. Shares held directly by RA Capital Healthcare Fund, L.P. (the "Fund").
- 3. RA Capital Management, L.P. (the "Adviser") is the investment manager for the Fund and RA Capital Nexus Fund II, L.P. (the "Nexus Fund II"). The general partner of the Adviser is RA Capital Management GP, LLC (the "Adviser GP"), of which Dr. Peter Kolchinsky and Mr. Rajeev Shah are the managing members. The Adviser, the Adviser GP, Dr. Kolchinsky, and Mr. Shah disclaim beneficial ownership of any of the reported securities, except to the extent of their pecuniary interest therein.
- 4. Shares held directly by the Nexus Fund II.

/s/ Peter Kolchinsky, Manager of RA Capital Management, L.P.	03/24/2022
/s/ Peter Kolchinsky, Manager of RA Capital Healthcare Fund GP, LLC the General Partner of RA Capital Healthcare Fund, L.P.	03/24/2022
/s/ Peter Kolchinsky, Manager of RA Capital Nexus Fund II GP, LLC the General Partner of RA Capital Nexus Fund II, L.P.	03/24/2022
/s/ Peter Kolchinsky, individually	03/24/2022
/s/ Rajeev Shah, individually	03/24/2022
** 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 5 (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