SEC Form 4	
FORM	4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL							
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hours per response:	0.5						

intended to satisf defense condition 1(c). See Instruct	ns of Rule 10b5-						
1. Name and Address of Reporting Person <sup>*</sup> Marks Gilbert Lynn			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>AN2 Therapeutics, Inc.</u> [ ANTX ]		tionship of Reporting Pers all applicable) Director	10% Owner	
	(First) APEUTICS, INC		3. Date of Earliest Transaction (Month/Day/Year) 12/19/2024		Officer (give title below)	Other (specify below)	
(Street)	NO REAL, SUITH		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi Line)	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person		
MENLO PARK (City)	(State)	94027 (Zip)			Form filed by More than ( Person	One Reporting	

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)						5. Amount of Securities Beneficially Owned Following Reported	Form: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock	12/19/2024		Α		8,972(1)	A	\$ <mark>0</mark>	31,802	D	

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(e.g., puts, cans, warrants, options, convertible securities)														
1. Title Deriva Securi (Instr.	tive Conversion ty or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount of		mount of ecurities nderlying erivative ecurity (Instr. 5)		Ownership Form:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents shares issued in lieu of cash compensation under the issuer's non-employee director compensation policy. All shares vest immediately.

/s/ Joshua Eizen, Attorney-in-East for Cithert Leven Marks 12/23/2024

Fact for Gilbert Lynn Marks

\*\* 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.