	FORM	4	UNITE	D ST/	ATE	S S	ECUR	ITIE	ES AND) E	ХСНА	NGE	CC	OMMIS	SION				
			Washington, D.C. 20549												OME			APPRO\	/AL
Section obligat	this box if no lo n 16. Form 4 or ions may contin tion 1(b).	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											HIP	OMB Number: 3235-0287 Estimated average burden 1 hours per response: 0.5					
1. Name and Address of Reporting Person* <u>Mattheakis Larry</u> (Last) (First) (Middle) C/O ANNEXON, INC.					2. Issuer Name and Ticker or Trading Symbol Annexon, Inc. [ANNX] 3. Date of Earliest Transaction (Month/Day/Year) 02/11/2022								(Che	telationship of Reporting Person(s) to Issuer eck all applicable) Director 10% Owner X Officer (give title Other (specify below) EVP & Chief Scientific Officer				<i>i</i> ner pecify	
1400 SIERRA POINT PKWY, BLDG C, STE 200						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. In	6. Individual or Joint/Group Filing (Check Applicable				
(Street) BRISBANE CA 94005														Line)	Form fil	ed by One Reporting Per ed by More than One Rep		0	
(City) (State) (Zip)																			
		Та	ble I - No	n-Deri	vativ	ve Se	ecurities	s Ac	quired, E	Dis	posed o	of, or	Bene	eficially	v Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Beneficia Owned Fe	s Ily ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 02/11/					L1/20	2022		Α		12,500	0 ⁽¹⁾ A \$		\$0.00) 12,500 ⁽²⁾			D		
			Table II -	Deriva (e.g.,	ative puts	e Sec 5, cal	urities Is, warr	Acq ants	uired, Di s, options	spo s, c	osed of, onverti	, or B ble se	enef ecuri	icially (ities)	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, T	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securitie Beneficia Owned Following Reported	ive ies ially ng ed	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				c	Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	0	mount r lumber f Shares		Transaction(s (Instr. 4)			
Stock Option	\$6.94	02/11/2022			A		100,000		(3)	0	2/11/2032	Comm		00,000	\$0.00	100,00	00	D	

Explanation of Responses:

1. Constitute restricted stock units ("RSUs") for which the Reporting Person is entitled to receive one (1) share of Common Stock for each RSU upon vesting. 1/3rd of the RSUs vest annually on February 11 of each year, with the first 1/3rd vesting on February 11, 2023.

2. Includes 12,500 RSUs.

Buy)

SEC Form 4

3. 1/48th of the shares subject to the option vest on each monthly anniversary measured from February 11, 2022 (the "Vesting Commencement Date"), such that 100% of the shares subject to the option will be fully vested and exercisable on the fourth anniversary of the Vesting Commencement Date.

/s/ Jennifer Lew, as Attorney-in-Fact for Larry Mattheakis

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 \ast 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.