

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

☐ 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. OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and Address of Reporting Person [*]	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer					
		(Check all applicable)					
McCarthy Reid	Annovis Bio, Inc. [ANVS]						
(Last) (First) (Middle)	3. Date of Earliest Transaction (MM/DD/YYYY)	X_Director10% Owner					
		Officer (give title below) Other (specify below)					
C/O ANNOVIS BIO, INC., 101	11/17/2023						
LINDENWOOD DR, SUITE 225							
(Street)	4. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line)					
MALVERN, PA 19355		X _ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)		Form filed by More than One Reporting Person					

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

				-	-					
1.Title of Security	2. Trans. Date	2A. Deemed	3. Trans. Co	de	4. Securit	ies Acquire	ed (A)	5. Amount of Securities Beneficially Owned	6.	7. Nature
(Instr. 3)		Execution	(Instr. 8)		or Disposed of (D)			Following Reported Transaction(s)	Ownership	of Indirect
		Date, if any	(II		(Instr. 3, 4 and 5)			(Instr. 3 and 4)	Form:	Beneficial
									Direct (D)	Ownership
									or Indirect	(Instr. 4)
						(A) or			(I) (Instr.	
			Code	V	Amount	(D)	Price		4)	
	_								-	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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(Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	4. Trans. Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date		Securities Underlying Derivative Security		Derivative Security (Instr. 5)	Securities Beneficially Owned	Ownership Form of Derivative	Beneficial Ownership (Instr. 4)
	Security		Code	v	(A)	(D)	Date Exercisable	Expiration Date		Amount or Number of Shares		Reported Transaction(s)	or Indirect	
Stock Option (right to buy) (1)	\$6.07	11/17/2023	Α		29,600		(2)	11/17/2033	Common Stock	29,600	\$0	29,600	D	

Explanation of Responses:

- (1) On June 12, 2024, stockholders of Annovis Bio, Inc. approved an amendment to the 2019 Equity Incentive Plan to increase the number of shares issuable thereunder from 2,000,000 to 3,000,000. 50% of the stock option grant listed was contingent upon the approval of such amendment and would have been forfeited if the amendment had not been approved.
- (2) The stock option shall vest immediately upon grant date.

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
McCarthy Reid C/O ANNOVIS BIO, INC. 101 LINDENWOOD DR, SUITE 225 MALVERN, PA 19355	х						

Signatures

/s/ Maria Maccecchini Attorney-in-Fact

**Signature of Reporting Person

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 control number.