FORM 4

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0287							
1	Estimated average burden								

0.5

hours per response:

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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Name and Address of Reporting Person*     Brown William Michael						2. Issuer Name <b>and</b> Ticker or Trading Symbol Altimmune, Inc. [ ALT ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
Brown william witchact														Offic	cioi cer (give title		er (specify	
(Loot)	<b>/</b> Fi	rot) (	Middle		3 Date o	f Farliest Tran	saction	(Month	ı/Da	v/Year)			$\dashv$	X belo		belo		
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 01/31/2020						Chief Financial Officer							
C/O ALTIMMUNE, INC., 910 CLOPPER ROAD,																		
SUITE 201S					4 If Amonday and Date of Original Filed (Adouble D. D.)							+	C to dividual an Initationary Filippy (Obs. I. A. V. I.					
						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)												X Form filed by One Reporting Person						
GAITHERSBURG MD 20878												Form filed by More than One Reporting						
					-									Pers	son		,	
(City)	(St	ate) (	Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,		Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			nd Secui Benet	ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect			
							Cod	e V	4	Amount		(A) or (D)	Price	Trans	action(s) . 3 and 4)		(motil 4)	
Common Stock, par value \$0.0001 01/31/					1/2020		A <sup>(1</sup>	)		8,061		A	\$1.4	46 <sup>(2)</sup>	8,061	D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expiration Date (Month/Day/Year) S			Am Sec Und Der Sec	Amount of Securities Sec		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D) or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)				

## Explanation of Responses:

1. These shares were purchased due to participation by the reporting individual in the issuer's 2019 Employee Stock Purchase Plan ("ESPP"). It pertains to the ESPP purchase period from August 1, 2019 through January 31, 2020.

(D)

(A)

Date Exercisable Expiration

Date

2. In accordance with the ESPP, these shares were purchased based on 85% of the closing price of the issuer's common stock on January 31, 2020.

Code

## Remarks:

<u>/s/William Brown</u> <u>02/04/2020</u>

Amount or Number

of Shares

Title

\*\* 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.