FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average b	urden								
hours nor resnance:	0.5								

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

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* Harris Matthew Scott						2. Issuer Name and Ticker or Trading Symbol Altimmune, Inc. [ALT]									all applic Directo Officer	fficer (give title		10% Ov	vner
(Last) C/O ALT SUITE 2	01/	3. Date of Earliest Transaction (Month/Day/Year) 01/31/2023										X Officer (give title Officer Specify below) Chief Medical Officer							
(Street) GAITHERSBURG MD 20878					_ 4. li	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S1		Zip)	lon Dori	rotive			ioo A			ionood o	of or D	onofic	براامن	Ourne				
			e ı - r	1	_				_	ea, D	isposed o			ally	_			1	
Da			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Benefic		es ially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(111511.4)
Common Stock, par value \$0.0001 01/			01/31/20)23				A ⁽¹⁾		1,296	A	\$10.20	10.2085 ⁽²⁾		3,917		D		
Common Stock, par value \$0.0001 02/01/2			02/01/20	023	3			M		6,166	A	\$0	\$0 ⁽³⁾		20,083		D		
Common Stock, par value \$0.0001 02/01/202				023	23			F ⁽⁴⁾		2,183	D	\$13	\$13.78		17,900		D		
		Т	able								sposed of , converti				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed tion Date, n/Day/Year)		Transaction Code (Instr.				e Exer ation D h/Day/		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amou or Numb of Share	er					
Restricted Stock Units	(3)	02/01/2023			M			6,166	(!	5)	(5)	Common Stock, par value	6,16	66	\$0.00	12,332		D	

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, 2022 through January 31, 2023.
- 2. In accordance with the ESPP, these shares were purchased based on 85% of the opening price of the issuer's common stock on August 1, 2022.
- 3. Each Restricted Stock Unit ("RSU") represents a contingent right to receive one share of Common Stock, par value \$0.0001, when vested.
- 4. Vesting transaction: Shares surrendered to the Issuer solely to cover taxes associated with vesting of RSUs.
- 5. The RSUs become vested in substantially equal annual installments over the 4 years following February 1, 2021, subject to the reporting person's continued service through the applicable vesting date, and have no expiration date.

/s/ Richard Eisenstadt, as 02/02/2023 Attorney-in-Fact

** 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.