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)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person*  Cover Vision IV.  Cover Vision IV.  Cover Vision IV.  Cover Vision IV.  Cover Vision IV.						2. Issuer Name and Ticker or Trading Symbol Altimmune, Inc. [ ALT ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Garg Vipin K															Direc	tor	109	Owner
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)								X	Office belov	er (give title v)	Oth bel	er (specify w)
C/O ALTIMMUNE, INC., 910 CLOPPER ROAD						07/31/2020									C	Chief Financial Officer		r
SUITE 201S																		
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable				
(Street)														Line) X Form filed by One Reporting Person				
GAITHERSBURG MD 20878														Λ	Form filed by More than One Reporting			
-															Perso		ie iliali Olie i	Reporting
(City)	(Sta	ate) (Z	ip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						Execution Date,			3. Transaction Disposed Of (D) (Instr. 8)				, 4 and Secu Bene Own		cially   Following	6. Ownershi Form: Direc (D) or Indire (I) (Instr. 4)	of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or Pri	ice		ed ction(s) 3 and 4)		(Instr. 4)
Common Stock, par value \$0.0001 07/31/20					020						11,674	A	. \$1	L.46 <sup>(2)</sup>	325,789		D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
				(e.g., pu	its, ca	alls, v	varra	ınts,	optio	ns, c	onvertib	le se	curiti	es)				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med 4. Transa Code ( Day/Year) 8)		action of		rities ired r osed ) : 3, 4	6. Date Exerc Expiration Da (Month/Day/)		ate	7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		De Se (In:	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct ( or Indir (I) (Insti	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	er				

## **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 February 1, 2020 through July 31, 2020.
- 2. In accordance with the ESPP, these shares were purchased based on 85% of the closing price of the issuer's common stock on February 1, 2020.

## Remarks:

/s/ William Brown, as Attorney-in-Fact

08/04/2020

\*\* 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.