SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this hav if no langer subject to
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

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

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average burden											
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1. Name and Address of Reporting Per	2. Issuer Name and Ticker or Trading Symbol Altimmune, Inc. [NASDAQ:ALT]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Schafer Klaus</u>								Director	10% 0	Dwner			
(Last) (First) 19 FIRSTFIELD ROAD, SUITE	3. Date of Earliest Transaction (Month/Day/Year) 05/04/2017							Officer (give title below)	Other below	(specify)			
(Street) GAITHERSBURG MD (City) (State)	20878 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indi Line) X	, ,				
1	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1. Title of Security (Instr. 3) Date (Month/D				2A. Deemed Execution Date, if any (Month/Day/Year)	Date, Transac Code (Ir		Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr. 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownershij	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)			
Common Stock, par value \$0.000	2017		Α		5,998	A	(1)	5,998	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (option to buy)	\$0.08	05/04/2017		A		4,775		05/04/2017	07/04/2022	Common Stock, par value \$0.0001	4,775	(2)	4,775	D	
Stock Option (option to buy)	\$0.08	05/04/2017		A		1,791		05/04/2017	07/04/2022	Common Stock, par value \$0.0001	1,791	(2)	1,791	D	
Stock Option (option to buy)	\$0.08	05/04/2017		A		1,791		05/04/2017	12/31/2022	Common Stock, par value \$0.0001	1,791	(2)	1,791	D	
Stock Option (option to buy)	\$0.59	05/04/2017		A		1,791		05/04/2017	12/31/2023	Common Stock, par value \$0.0001	1,791	(2)	1,791	D	

Explanation of Responses:

1. Acquired pursuant to the Agreement and Plan of Merger, dated as of January 18, 2017 (as amended on March 29, 2017, the "Merger Agreement"), pursuant to which a wholly-owned subsidiary of the Issuer merged with and into Altimmune, Inc. ("Altimmune"). Pursuant to the Merger Agreement, the then outstanding shares of Altimmune's capital stock was converted into the right to receive a number of shares of the Issuer's common stock, par value \$0.0001 on a 0.749106:1 basis upon the closing of the merger.

2. Pursuant to the terms of the Merger Agreement, the Issuer assumed all outstanding options to purchase shares of Altimmune capital stock on a 0.749106:1 basis upon closing of the merger.

Remarks:

<u>/s/ Ori Solomon, Attorney in</u> fact for Klaus Schafer

<u>05/08/2017</u>

** 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.