FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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 burden							
hours per response	: 0.5						

Instruc	tion 1(b).			Filed	pursua or Se	nt to Section 3	ection 80(h) o	16(a) of the Ir	of the S rvestme	ecurit nt Co	ies Exchang mpany Act o	e Act of f 1940	1934					
Name and Address of Reporting Person* <u>Pisano Wayne</u>				2. Issuer Name and Ticker or Trading Symbol Altimmune, Inc. [ALT]								theck all a	tionship of Reporting I all applicable) Director		Person(s) to Issuer 10% Owner			
(Last) (First) (Middle) C/O ALTIMMUNE, INC., 910 CLOPPER ROAD,				ROAD,	3. Date of Earliest Transaction (Month/Day/Year) 11/12/2020										ficer (give title low)		Other below)	specify
SUITE 201S (Street) GAITHERSBURG MD 20878					4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicabl Line) X Form filed by One Reporting Person Form filed by More than One Reporting				son	
(City)	(Sta	ate) (Z	Zip)												rson			J
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or Be	nefic	ally Ov	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)				y/Year) Exec		Deemed ecution Date, ny onth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securitie Disposed (5)		es Acquired (A Of (D) (Instr. 3,		nd Sec Ben Owi	mount of urities eficially ned Following orted	Forr (D) (ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Trai	esaction(s) tr. 3 and 4)			(111511. 4)
Common Stock, par value \$0.0001 11/12/2				2020			S ⁽¹⁾		10,352	D	\$9.9)(2)	8,498		D			
		Tal									osed of, convertib				ied			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code (8)	Instr.	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instrand 5	rities lired r osed) r. 3, 4	6. Date	ion Da /Day/Y	Expiration		of es ing ve / (Instr.	8. Price Derivativ Security (Instr. 5)	e derivative	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$9.75 to \$10.16, inclusive. The reporting person undertakes to provide to Altimmune, Inc., any security holder of Altimmune, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

Remarks:

/s/William Brown, as 11/13/2020 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.