FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

## 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

1. Name and Address of Reporting Person* <u>Garg Vipin K</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol Altimmune, Inc. [ ALT ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
	<u> </u>													X	Direc	tor er (give title			specify
(Last)	(Fir	st) (N	Middle)		3. Da	Date of Earliest Transaction (Month/Day/Year)								X	belov			below)	Specify
C/O ALTIMMUNE, INC., 910 CLOPPER ROAD,						05/30/2021													
SUITE 201S																			
		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable								
(Street)			<del>-</del>											Line)  X Form filed by One Reporting Person					
GAITHE	RSBURG,	MD	20878											Form filed by More than One Reporting					
(City)	(Sta	oto) (7	7in\												Perso			·	
(City)	(50	(z	Zip)																
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	icially	y Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution Date,			3. Transaction Code (Instr. 8)  4. Securitie: Disposed O 5)					4 and Securit		ties cially I Following	Forn (D) c	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) (D)	or Pri	се	Transa	action(s) 3 and 4)			(Instr. 4)
Common Stock, par value \$0.0001 05/30/2						2021					2,577	D	\$ \$	.2.65 30		04,606		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)	Execution Date,		4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo	r osed ) r. 3, 4	6. Date Expirat (Month)	ion Da /Day/Y			nt er		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

1. Vesting transaction: Shares surrendered to the Issuer solely to cover taxes associated with vesting of restricted stock.

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

\*\* Signature of Reporting Person Date

06/02/2021

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.