FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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*						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						<u> </u>									Direc	tor	10% Owner		wner
(Last) (First) (Middle)					3. Da	Date of Earliest Transaction (Month/Day/Year)									Office belov	er (give title v)		Other (below)	specify
C/O ALTIMMUNE, INC., 910 CLOPPER ROAD,						03/30/2021										President and CEO		CEO	
SUITE 201S																			
	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable										
(Street)						Jacob Grand Land (								Line)					
GAITHERSBURG MD 20878														X	X Form filed by One Reporting Person				
															Form filed by More than One Reporting Person				
(City)	(Sta	ate) (Z	(Zip)																
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. 4. Securities Acquire Transaction Disposed Of (D) (Inst Code (Instr. 8)				, 4 and Sec Ber Ow		unt of ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or Pr	ice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock, par value \$0.0001 03/30/2					.021						1,998	D	\$	13.55	5 309,182			D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
				(e.g., pu	ıts, ca	ılls, 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 (i Day/Year) 8)				rative rities ired r osed )	6. Date Exerc Expiration Da (Month/Day/Y		ite	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	illy [	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	er					

## **Explanation of Responses:**

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

## Remarks:

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

03/31/2021

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.