Instruction 1(b).

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**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

۷	Vas	hing	ton,	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								

					01.56	ection 3	so(n) or the	invesim	ent C	ompany Act o	11940							
1. Name and Address of Reporting Person*  Harris Matthew Scott				2. Issuer Name and Ticker or Trading Symbol Altimmune, Inc. [ ALT ]							Check a	all app	o of Reportir licable)	J	` '			
											X	Direc	ctor 10%		10% O	wner		
(Last)	(Fii	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/12/2020								Officer (give title below)		Other (spec below)		specify	
910 CLOPPER ROAD, 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					on	
GAITHERSBURG MD 20878			<u> </u>								Form filed by More than One Reporting Person					orting		
(City)	(St	ate) (2	Zip)															
		Table	I - No	on-Deriva	tive	Secui	rities Ac	quirec	d, Di	sposed of	, or Be	enefic	ially (	Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)					Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3,				4 and 5) Sec Ben Ow		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price	1	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock, par value \$0.0001 11/12/20			020			<b>S</b> <sup>(1)</sup>		4,015	D	\$10.0	0.02 <sup>(2)</sup> 4,069		D					
		Tal	ble II							oosed of, convertib				wne	d			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transa Code 8)	action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	of Expiration I (Month/Day Securities Acquired (A) or Disposed of (D) (Instr. 3, 4			te Amount of		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own For Dire or I	nership m: ect (D) ndirect Instr. 4)	11. Nature of Indirect Beneficial Ownershi (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.

(D)

(A)

Date Exercisable

Expiration Date

## Remarks:

/s/ William Brown, as 11/13/2020 Attorney-in-Fact

\*\* Signature of Reporting Person Date

Amount Number

of Shares

Title

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).

Code

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.