FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP
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OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* Roberts M Scot					2. Issuer Name and Ticker or Trading Symbol Altimmune, Inc. [ALT]						(Che	ck all applica	able)	Person(s) to Issuer 10% Owner Other (specify		mer	
(Last) (First) (Middle) C/O ALTIMMUNE, INC., 910 CLOPPER ROAD, SUITE 201S					3. Date of Earliest Transaction (Month/Day/Year) 01/30/2023							X Officer (give title Other (specify below) Chief Scientific Officer					
(Street) GAITHERSBURG MD 20878 (City) (State) (Zip)				4	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(- 3)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3) 2. Trans. Date (Month/I			e	2A. Deemed Execution Date, if any (Month/Day/Year		Code (Ins	ion Di	. Securi isposed	ties Acquire d Of (D) (Ins	ed (A) or tr. 3, 4 and 5	5. Amoun Securities Beneficial Owned Fo	s I	Form:	Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	/ A	mount	(A) or (D)	Price	Transaction	ransaction(s) nstr. 3 and 4)					
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	Code	action (Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year)		and	7. Title and of Securiti Underlying Derivative (Instr. 3 ar	es g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Ownership Form:	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expir Date	ration	Title	Amount or Number of Shares		(Instr. 4)			
Stock Options (option to buy)	\$12.88	01/30/2023		A		105,000		(1)	01/30	0/2033	Common Stock, par value \$0.0001	105,000	\$0.00	105,00	0	D	
Restricted Stock Units	(2)	01/30/2023		A		37,100		(3)	((3)	Common Stock, par value \$0.0001	37,100	\$0.00	37,100)	D	

Explanation of Responses:

- 1. Twenty-five percent of the shares underlying the option become vested and exercisable on January 30, 2024 and the remaining 75% of the shares underlying the option become vested and exercisable in substantially equal monthly installments over the 36 months following January 30, 2024, subject to the reporting person's continued service through the applicable vesting date.
- 2. Each Restricted Stock Unit ("RSU") represents a contingent right to receive one share of Common Stock, par value \$0.0001, when vested.
- 3. The RSUs become vested in substantially equal annual installments over the 4 years following January 30, 2023, subject to the reporting person's continued service through the applicable vesting date, and have no expiration date.

/s/ Richard Eisenstadt, as 02/01/2023 Attorney-in-Fact

** Signature of Reporting Person

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.