FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPRO	VAL
OMB Number:	3235-0287
Estimated average burde	n
hours per response:	0.5

obligatio Instructi	ons may continuon 1(b).	ue. See		F							ies Exchanç mpany Act o		934		hour	s per res	ponse:	0.5	
Name and Address of Reporting Person* Novartis Bioventures Ltd					2. Issuer Name and Ticker or Trading Symbol Altimmune, Inc. [ALT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner						
(Last) (First) (Middle) C/O NOVARTIS INTERNATIONAL AG LICHTSTRASSE 35				01	1/17/2	2018	liest Transa	`				Officer (give title Other (specify below)							
(Street) BASEL V8 CH-4056					_	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person					
(City)	(St		(Zip)	n Dei	rivatio	vo S	ocur	ities Ac	nuired	Die	nosed o	f or Ben	eficially	Owned					
Date			2. Trai	nsactio	n	2A. Do Execu	eemed ution Date,	3. Transa Code (ection	4. Securitie	es Acquired Of (D) (Instr	I (A) or	5. Amount Securities Beneficially Owned Foll	y	6. Own Form: (D) or I (I) (Inst	Direct ndirect	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	mount (A) or (D)		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock, par value \$0.0001			01/	17/20	/2018			J ⁽¹⁾		176,580	6 A	(1)	2,534,561		I		See Footnote ⁽²⁾		
			Table II -								osed of, convertib			Owned					
Derivative Conversion Date Executity Or Exercise (Month/Day/Year) if all		3A. Deemed Execution D if any (Month/Day/	ion Date,		ransaction ode (Instr.		Derivative		6. Date Exercis Expiration Date (Month/Day/Ye		te of Securities		8. Price of Derivative Security (Instr. 5)	9. Num derivati Securit Benefic Owned Followi Reporte Transac	/e (ces Fially [cong (description)]	10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares		(Instr. 4				
Series B Convertible Preferred Stock	\$2.67 ⁽³⁾	01/17/2018			J ⁽¹⁾			344.9398	08/21/2	017	08/15/2018	Common Stock, par value \$0.0001	129,188	(1)	2,069	.6276	I	See Footnote ⁽²⁾	
	d Address of F S Biovent	Reporting Person* ures Ltd																	
(Last) (First) (Middle)																			

Novartis Bioventures Ltd									
(Last)	Last) (First)								
C/O NOVARTIS INTERNATIONAL AG									
LICHTSTRASSE 35									
(Street)									
BASEL	V8	CH-4056							
(City)	(State)	(Zip)							
Name and Address of Reporting Person* NOVARTIS AG									
(Last)	Last) (First) (Middle)								
C/O NOVARTIS INTERNATIONAL AG									
LICHTSTRASSE 35									
(Street)									
BASEL	V8	CH-4056							
(City)	(State)	(Zip)							

Explanation of Responses:

- 1. Pursuant to the terms of the Series B Convertible Preferred Stock (the "Preferred Stock"), the Issuer converted the Preferred Stock into shares of the Issuer's common stock, par value \$0.0001 per share (the "Common Stock") at the installment conversion price of \$1.6420 per share of Common Stock.
- 2. The board of directors of Novartis Bioventures Ltd has sole voting and investment control and power over such securities. None of the members of its board of directors has individual voting or investment power with respect to such securities and each disclaims beneficial ownership of such securities. Novartis Bioventures Ltd is an indirectly owned subsidiary of Novartis AG.
- 3. The Issuer's Preferred Stock is convertible at any time at the option of the holder into shares of the Issuer's Common Stock, subject to certain restrictions, at an initial conversion price of \$2.67 per share and a stated amount of \$1,000 per share.

Remarks:

/s/ Bart Dzikowski, Secretary of the Board of Novartis

Bioventures Ltd

/s/ Stephan Sandmeier,
Authorized Signatory of Novartis Bioventures Ltd

/s/ Bart Dzikowski, Authorized Signatory of Novartis AG

/s/ Stephan Sandmeier,
Authorized Signatory of Novartis AG

/s/ Stephan Sandmeier,
Authorized Signatory of Novartis AG

Novartis AG

** 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.