FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

nger subject to	
Form 5	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

intende defens	ed to satisfy the conditions of the conditions of the conditions of the conditions of the condition of the c	e affirmative Rule 10b5-																				
Name and Address of Reporting Person* IlWaddi Holdings							2. Issuer Name and Ticker or Trading Symbol AlTi Global, Inc. [ALTI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director							
(Last) (First) (Middle) C/O GELLER ADVISORS						3. Date of Earliest Transaction (Month/Day/Year) 09/10/2024								Officer (give title Other (specify below) below)								
909 THIRD AVENUE					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable							
(Street) NEW YORK NY 10022																Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	rate) (2	Zip)																			
			I - No			_			_	d, Di	sposed of				1							
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/						2A. Deemed Execution Date, if any (Month/Day/Year		ion Date,	3. Transaction Code (Instr. 8)			Acquired (A) of (D) (Instr. 3, 4				s ally ollowing	Form:	nership : Direct Indirect str. 4)	Indire Bene	ficial ership		
			Code V Amount (A) or (D) Price (Instr. 3 and 4)								, , ,											
Class A (Common St	ock		09/10/2	024				P		5,854	A	\$.	3.87	18,11	7,850]	[⁽¹⁾	See Foot	tnote ⁽²⁾		
	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)	if any	eemed ition Date, h/Day/Year)		nsaction of Deriv Secul Acqu (A) or Dispo of (D) (Instr		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expiration D (Month/Day/		Date	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (In	Price of erivative ecurity nstr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	re es ally g	10. Ownersh Form: Direct (D or Indire (I) (Instr.	ip o B) C ct (l	1. Nature of Indirect Beneficial Ownership Instr. 4)		
					Code	v		(A) (D)	Date Exerc	cisable	Expiration Date	Title	Amor or Numl of Share	ber								
ı	nd Address of i <u>Holding</u>	f Reporting Person* <u>3S</u>																				
l	LLER ADV		(M	liddle)		_																
(Street) NEW Y	ORK	NY	10	0022																		
(City)		(State)	(Z	ip)																		
		f Reporting Person* Abdulaziz																				
l	LLER ADV		(N	liddle)																		
(Street)																						

NY

(State)

10022

(Zip)

NEW YORK

(City)

1. Shares directly owned by IlWaddi Holdings.

2. H.E. Sheikh Jassim bin Abdulaziz J.H. Al-Thani is the sole owner of IlWaddi Holdings.

/s/ H.E. Sheikh Jassim
Abdulaziz J.H. Al-Thani for
IlWaddi Holdings, By: Sheikh
Jassim Abdulaziz J.H. Al-

Thani, as sole owner

/s/ H.E. Sheikh Jassim
Abdulaziz J.H. Al-Thani

** Signature of Reporting Person

09/12/2024

Date

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.