FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

I	OMB APPRO	VAL				
	OMB Number:	3235-0287				
	Estimated average burden					
l	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* Brophy Warson Tracey					2. Issuer Name and Ticker or Trading Symbol AlTi Global, Inc. [ALTI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 06/27/2024								Officer (give title below)			Other (sp below)	ecify	
C/O ALTI GLOBAL, INC. 520 MADISON AVENUE, 26TH FLOOR				4. If Amendment, Date of Original Filed (Month/Day/Year) 07/01/2024								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
(Street) NEW YO	(Street) NEW YORK NY 10022				Rule 10b5-1(c) Transaction Indication													
(City)	3)	State)	(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								instruction or written plan that is intended to satisfy the					
			Table I - Non	-Deriv	ative	Securitie	s Ac	quired, D	Disp	osed o	of, or Be	neficially C	wned					
1. Title of Security (Instr. 3) 2. Trans Date (Month)				2A. Deemed Execution Date if any (Month/Day/Ye		n Date	r, Transaction Dispose Code (Instr.		rities Acquired (A) or ed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									v	Amount (A) or (D)		or Price	(Instr. 3 and 4)				11501. 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)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			Securities	d Amount of Underlying Security (Instr.	8. Price of Derivative Security (Instr. 5)	9. Numb derivati Securiti Benefic Owned Followin	ve es ially ng	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable		piration ate	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)				
Restricted Stock Units	(1)	06/27/2024		A		22,312.37 ⁽²⁾		(3)		(3)	Class A Common Stock	22,312.37(2)	\$0	22,312	2.37 ⁽²⁾	D		

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of AlTi Global, Inc. Class A Common Stock.
- 2. This Form 4 Amendment is being filed solely to correct an administrative error on the number of the restricted stock units granted to the Reporting Person on June 27, 2024 in the Form 4 filed by the Reporting Person on
- 3. The restricted stock units vest in whole on the earlier of (i) the business day immediately prior to AlTi Global, Inc.'s 2025 annual general meeting or (ii) June 30, 2025.

Remarks:

/s/ Colleen Graham, Attorney-in-07/26/2024

** Signature of Reporting Person

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.