FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
-------------	------	-------	--

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

Name and Address of Reporting Person*     Moran Kevin P.			2. Issuer Name and Ticker or Trading Symbol AlTi Global, Inc. [ ALTI ]								heck all ap <sub>l</sub> Dire	ctor	ng Pei	10% Ov	vner				
(Last)	(Fir	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year)  05/14/2024  X Officer (give title below)  See Remarks										вреспу				
C/O ALTI GLOBAL, INC. 520 MADISON AVENUE, 26TH FLOOR				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) NEW YO	ORK NY	7 1	0022			X Form filed by One Reporting Person  Form filed by More than One Reporting Person								- 1					
(City)	(St	ate) (2	Zip)		Rule 10b5-1(c) Transaction Indication														
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or I	Ben	eficia	ally Owr	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)			Execution if any		cution							nd Securi Benef Owne	icially d Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A)	) or )	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Class A Common Stock 05/			05/14/	/2024			S		591	D \$4		<b>\$4</b> .	.7 175,184.2			D			
		Tal									osed of, onvertib					d			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Security or Exercise (Month/Day/Year) if any		Transaction Code (Instr. 8)		of Deriv	r osed ) r. 3, 4		on Da	te	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		f 9	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Nur of	ount nber ires					

**Explanation of Responses:** 

President and Chief Operating Officer

/s/Colleen Graham, attorney in 05/16/2024 fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.