FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

KH	IE2	AND E	XCHANGE	COMMISSIO
			_	

OMB APP	ROVAL								
OMB Number:	3235-0287								
Estimated average burden									
houre per reenonce	. 0.5								

Check this box if no longer subject to 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 intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(0). 0	ee instruction i	· .																	
Name and Address of Reporting Person* Scapa James Ralph				2. Issuer Name and Ticker or Trading Symbol Altair Engineering Inc. [ALTR]						Relationship of Reporting Person(s) to Issuer (Check all applicable)									
<u>beapa .</u>	diffes ital	<u>1911</u>												Direc		1	10% O		
(Last)	(Fir	ent) (N	/liddle)		O. Data of Facilitat Transaction (March/Davidos)							-		Office	er (give title		Other (s	specify	
. ,	`	/	,		3. Date of Earliest Transaction (Month/Day/Year) 12/03/2024							Chief Executive Officer							
C/O ALTAIR ENGINEERING INC.					12/03/2021														
1820 E. I	BIG BEAV	ER RD.																	
-					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)												"	Form filed by One Reporting Person					n	
TROY	MI	4	8083											Form filed by More than One Reporting					
-														Person					
(City)	(Sta	ate) (2	Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				Execution Date,		ition Date,	Transaction Disposed C Code (Instr. 5)		s Acquired (A) o of (D) (Instr. 3, 4 a		Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) or (D)	Price	T	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Class A Common Stock 12/03/20				2024			S ⁽¹⁾		16,095	5 D \$1		.65	117,950(2)		D				
Class A Common Stock													1,	193 ⁽³⁾		I	By wife		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of 2. 3. Transaction				BA. Deemed		otlon	5. Number of	6. Date Exercisable and		7. Title a		8. Price of Derivative		9. Number		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
Derivative Security (Instr. 3)	urity or Exercise (Month/Day/Year) if any		,	Transaction Code (Instr. 8)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Secur (Instr.	rity						

Explanation of Responses:

1. Shares sold to satisfy the tax withholding obligation in connection with the vesting of Class A Common Stock restricted stock units.

Code

- 2. Includes 88,194 Class A Common Stock restricted stock units that are unvested.
- 3. Includes 20 Class A Common Stock restricted stock units that are unvested.

/s/ Raoul Maitra, attorney-infact for James R. Scapa

or Number

Shares

Title

12/05/2024

** 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.

(D)

Exercisable

Date

(A)