FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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* Tzetzo Nicole R | | | | | | 2. Issuer Name and Ticker or Trading Symbol ALLIENT INC [ALNT] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
|--|-----|------|-------------|---|---|--|-----|---|-------------------------|----------------------------------|--|-----------------------------|--|---|--|--|---|--|--|
| (Last) | (Fi | , | lle) | 3. Date of Earliest Transaction (Month/Day/Year) 08/07/2024 | | | | | | | | | | | | | er (specif | fy | |
| C/O ALLIENT INC. 495 COMMERCE DRIVE | | | | | | 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 | | | | | |
| (Street) AMHERST NY 142 | | | | 28 | | | | | | | | | | Form Perso | | y More th | an One | Reporting | |
| (City) | (St | Zip) | | Ru | Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | uction o | r written pl | an that is | intended to | to | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) | | | | 2. Transaction Date (Month/Day/Ye | ear) E | 2A. Deeme Execution if any (Month/Da | | Date, 1 | | action | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at 5) | | | Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | С | Code V | | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | | (Instr. 4) | |
| Common Stock | | | | 08/07/2024 | | | | 1 | A ⁽¹⁾ | | 905 | A | \$23.86 | 9,173 | | D | D | | |
| Common Stock | | | | | | | | | | | | | | 600 | | | | By general artnership ⁽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) | | | Exe if a | . Deemed ecution Date, iny onth/Day/Year) | | Transaction Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Date Exe piration onth/Day | | Amo Secu Unde Deri | , | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Owners Form: Direct (or Indir (I) (Inst | hip of Ir Ben D) Owr ect (Ins | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Dat Exe | te ercisable | Expiration e Date | Title | Amount or Number of Shares | | | | | | |

Explanation of Responses:

- 1. Grant of quarterly retainer shares pursuant to the Company's Non-Employee Director Compensation Policy under the 2017 Omnibus Incentive Plan.
- 2. The reporting person's spouse is a general partner of the partnership that owns the reported securities. The reporting person disclaims beneficial ownership of the reported securities except to the extent of her spouse's pecuniary interest therein.

Michael C. Donlon, attorneyin-fact for Nicole R. Tzetzo

08/08/2024

** 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.