FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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ONB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									

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

hours per response: 0.5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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Name and Address of Reporting Person* Krop Julie					2. Issuer Name and Ticker or Trading Symbol Aquestive Therapeutics, Inc. [AQST]							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Trop vane					-									X Directo			10% Ow	/ner	
(Last)						3. Date of Earliest Transaction (Month/Day/Year) 06/21/2023								Officer below)	(give title		Other (s below)	pecify	
C/O AQUESTIVE THERAPEUTICS, INC.					4 If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
30 TECHNOLOGY DRIVE				""	in an entancial, bate of original rilea (Month bay) real)								Line)						
STEELINGEOUT BIAVE														X Form filed by One Reporting Person					
(Street) WARREN NJ 07059												Form filed by More than One Reporting Person							
WITTELL	WARREIN INJ 07059		07033		Б	Rule 10b5-1(c) Transaction Indication													
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(City)	(S	tate)	(Zip)		Ιп	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 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
		ıan	ie i - Nor	1-Deriv	vative	Se	curitie	S A	cquirea, D	sp	osea o	T, or Be	neticiai	y Owned	1				
1. Title of	Security (Ins	tr. 3)		2. Trans	saction												7. Nature of Indirect		
					/Day/Yea	y/Year) if any Code							sii. 3, 4 ani	Benefici	ally (D) o		or Indirect E	Beneficial	
						(Month/Day/Yea			ar) 8)				Owned I Reporte	ollowing d	(I) (Instr. 4)		Ownership (Instr. 4)		
								Code	,	Amount	ınt (A) or F		Transac	action(s) 3 and 4)			,,		
											<u> </u>	, ,			and 4)				
		٦							uired, Dis	•	,		,	Owned					
				(e.g., p	outs, o	call	s, warr	ant	s, options,	CC	onvertil	ole secu	rities)						
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution I Security or Exercise (Month/Day/Year) if any			Date,	4. Transaction Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
													Amount						
													Number						
					Code	v	(A)	(D)	Date Exercisable		kpiration ate	Title	of Shares						
Stock Option (Right to Purchase)	\$2.02	06/21/2023			A		25,000		06/21/2024 ⁽¹⁾	06	5/21/2033	Common Stock	25,000	\$0	25,000)	D		

Explanation of Responses:

1. The shares underlying the options vest as follows: 100% of the underlying shares vest June 21, 2024, subject to Dr. Krop's continuous service with the Issuer from the grant date through the applicable vesting date.

Remarks:

/s/ Lori Braender, as Attorney-06/23/2023 In-Fact

** 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.