FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden 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*				2. Issuer Name and Ticker or Trading Symbol Aquestive Therapeutics, Inc. [AQST]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Kendall Keith J						== <u>1</u> ===== [X Dire		ctor 10		10% C	wner
(Last) (First) (Middle)			3. D	Date of Earliest Transaction (Month/Day/Year)								\dashv	X Office below		er (give title w)		Other (specify below)			
C/O AQUESTIVE THERAPEUTICS, INC.			11/3	11/27/2018								CEO and President								
30 TECHNOLOGY DRIVE													_							
(Street)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
l ` ′	WARREN NJ 07059													X Form filed by One Reporting Person Form filed by More than One Reporting						
															Forn Pers		re than O	ne Rep	orting	
(City)	(St	ate) (Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		Transaction Disposed Of Code (Instr. 5)			ties Acquired (A) I Of (D) (Instr. 3, 4			4 and Secur Benet		cially I Following	6. Owne Form: D (D) or In (I) (Instr	irect direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount		(A) or (D)	Price	Tran		action(s) 3 and 4)			(1130.4)
Common Stock 11/27				7/2018						1,000)	A	\$9.	9.87 6		21,139	D)		
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) (Month/Day/Year) (Month/				Date, Transaction Code (Instr.		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: ct (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nur of	ount nber ires						

Explanation of Responses:

/s/ Robert Arnold, as Attorney-11/28/2018

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.