FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF (CHANGES	IN BENEFICIA	AL.	OWNERSHIP
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OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average b	ourden								
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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						riquestre incrupeuties, mei [11001]										X Director		10% Owner		vner		
_	UESTIVE T	ΓHERAPEUTIC	(Middle) S, INC.			3. Date of Earliest Transaction (Month/Day/Year) 12/31/2018										X Office below	,	Other (specify below) 1 President		specify		
30 TECHNOLOGY DRIVE					. 4 11	4 If Amendment Date of Original Filed (Month/Per/Area)											6. Individual or Joint/Group Filing (Check Applicable					
(Street) WARRE	N N.	J (07059			4. If Amendment, Date of Original Filed (Month/Day/Year)								X Form filed by One Reporting Person Form filed by More than One Reporting								
(City)	(S	tate) ((Zip)			Person																
		Tab	le I - Non	-Deriv	ative	Sec	curiti	es A	cqu	ired,	Disp	osed	of, o	r Ben	eficia	lly Owne	d					
Date			Date	h/Day/Year) i		2A. Deemed Execution Date if any (Month/Day/Ye		Code (I		ction Dispo		ecurities Acquired (A) posed Of (D) (Instr. 3,			d Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										Code	v	Amoun	t	(A) or (D)	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(111511.4)		
Common Stock 12				12/3	1/201	/2018				M		329		A	(1)	628,863			D			
Common Stock 12			12/3	1/2018					F		162	2 D S		\$6	3 62	8,701	,701					
	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 (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)				Date,	Code (Instr				6. Date Exercisab Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form Direc or Ind (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exe	e ercisable		piration te	Title	0	lumber							
Restricted Stock Unit	(1)	12/31/2018			M			329		(2)		(2)	Com		329	\$0	1,978		D			

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.
- 2. The restricted stock units vest in 8 equal (or as nearly equal as possible) quarterly installments beginning on September 30, 2018, subject in each case to Mr. Kendall's continuous service with the Issuer from the grant date through the applicable vesting date. Vested shares will be delivered to the reporting person as soon as practicable following the vesting date thereof.

/s/ Robert Arnold, as Attorney- 01/03/2019 **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.