FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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| | OMB Number: | 3235-0287 | | | | | | | | |
| | 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Shah Tushar | | | | | Lic | Issuer Name and Ticker or Trading Symbol Liquidia Corp [LQDA] Date of Earliest Transaction (Month/Day/Year) | | | | | | | ck all applica Director | | g Person(s) to Issuer 10% Owne Other (spe below) | | ner | |
|--|--|--|------|---------------------|--|--|--|---|---------------------|--------------------|---|---|--|-------------------------|--|---------------------------------------|-----|--|
| (Last) (First) (Middle) 419 DAVIS DRIVE, SUITE 100 | | | | | 01/ | 01/19/2021 | | | | | | | CMO and Head of R&D | | | | | |
| (Street) MORRISVILLE NC 27560 | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | |
| (City) | (Sta | ate) (| Zip) | | | Person | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans: Date (Month/L | | | | | Execution Date, | | 3. Transaction Code (Instr 8) | | | | 5. Amount Securities Beneficial Owned Fo Reported | Form (D) or | | Direct Indirect Itr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | Code V | Amount | (A) or (D) | (A) or (D) Price | | Transaction(s) (Instr. 3 and 4) | | | | | |
| | 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 | Exercise (Month/Day/Year) if any (Month/Day/Year) 8) | | Transac Code (li | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and A of Securities Underlying Derivative St (Instr. 3 and | | | es G Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficia Owned Following Reported Transacti | e s ully | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | on(s) | | | |
| Employee Stock Option (right to buy) | \$2.97 | 01/19/2021 | | | A | | 102,500 | | (1) | 01/19/2031 | Common Stock | 102,500 | \$0 | 102,50 | 00 | D | | |
| Performance Stock Units | \$0 | 01/19/2021 | | | A | | 51,250 | | (2) | (2) | Common Stock | 51,250 | \$0 | 51,25 | 0 | D | | |

Explanation of Responses:

- 1. The option vests in equal monthly installments over a four-year period, becoming fully vested on January 19, 2025.
- 2. The performance stock units (PSUs) vest in full upon tentative approval by the U.S. Food and Drug Administration of the New Drug Application for LIQ861. Each PSU represents a contingent right to receive one share of common stock of the issuer.

/s/ Michael A. Goldstein, Esq., as attorney-in-fact for Dr.

Tushar Shah

** Signature of Reporting Person Date

01/20/2021

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.