FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Nashington	D.C.	20549	

ton, D.C. 20549	OMB APPROV

ΆL

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

1. Name and Address of Reporting Person* White Christopher Eric					2. Issuer Name and Ticker or Trading Symbol Ipsidy Inc. [IDTY]								(Chec	ationship of k all applicat Director Officer (g	ole)	Person(s) to Issuer 10% Owner Other (specify		/ner
(Last)	,	First) 670 LONG BEA	(Middle) CH BLVD.		3. Date of Earliest Transaction (Month/Day/Year) 05/05/2021							, x	X Officer (give tide Streetly below) Chief Technology Officer					
(Street)	BEACH, 1	NY	11561		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								
(City)	(State)	(Zip)		Form filed by More than One Reporting Pe								ng Person					
		7	able I - Non	-Deriva	tive S	Securitie	s Ac	cquired,	Disp	osed o	of, or B	enefi	cially (Owned				
Dia contract of the contract o			2. Transa Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year)		, Transaction Disposed Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 an			5. Amount Securities Beneficiall Owned Fol	y	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
								v	Amount	Amount (A) or (D)		rice	Reported Transactio (Instr. 3 an	on(s) nd 4)			(Instr. 4)	
Common Stock, \$.0001 par value														750,0	00(1)		D	
			Table II - D					uired, D s, option						wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year	Code	action (Instr.	Derivative E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amoun Securities Underlyi Derivative Security (Instr. 3 and 4)		rlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Followin Reported	re es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title		unt or ber of es		Transact (Instr. 4)			
Stock Options ⁽⁴⁾	\$0.24	05/05/2021		A		1,500,000		05/05/2021	L 05	5/05/2031	Common Stock, \$0.0001 par value per share	1,50	00,000	\$0.0	1,500,	00,000 D		
Stock Options ⁽²⁾	\$0.0925							10/07/2020) 10	0/07/2030	Common Stock, \$0.0001 par value per share	2,50	00,000		2,500,	000	D	
Stock Options ⁽³⁾	\$0.119							05/28/2019	9 05	5/28/2029	Common Stock, \$0.0001 par value per share	250	0,000		250,0	000	D	

Explanation of Responses:

- 1. Shares of common stock vest one-third each on June 3, 2019, 2020, 2021 subject to Mr. White's continued employment.
- 2. The Stock Options vest with respect to one-third of the shares of common stock on each of October 7, 2021, 2022 and 2023 subject to Mr. White's continued employment.
- 3. The shares of common stock under the Stock Options vest as follows: (a) 125,000 upon achievement of agreed performance goals and (b) 125,000 as to one-third on each of February 18, 2020, 2021 and 2022.
- 4. Shares of common stock underlying the stock options vest one third on each anniversary of grant subject to continued service to Ipsidy Inc. and subject to a prior Change of Control.

05/07/2021

** 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.