FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT	OF	CHANGES	IN BENEFICIAL	. OWNERSHIP

OMB APPRO	JVAL			
OMB Number:	3235-0287			
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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 CATALYST PHARMACEUTICALS, INC.									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
O'Keeffe Charles B						[ CPRX ]										er (give title		(specify	
(Last) (First) (Middle) 355 ALHAMBRA CIRCLE, SUITE 1250						3. Date of Earliest Transaction (Month/Day/Year) 11/19/2015									belo	W)	below	)	
(Street) CORAL GABLES FL 33134				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	dividual or Joint/Group Filing (Check Applicable   Form filed by One Reporting Person					
(City)		ate) (.	Zip)												Form filed by More than One Reporting Person				
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Ac	quired	, Dis	posed o	f, or	Ben	eficiall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)					Execution Date		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			) Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount (A) or (D)		Price	Trans	action(s) 3 and 4)		(Instr. 4)		
Common stock, par value \$0.001 per share 11/19/2				2015		P		5,000		A	\$2.296	367,126		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)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Year		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Di Si (II	Price of erivative ecurity istr. 5)	vative derivative irity Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or	ount nber ires					

**Explanation of Responses:** 

/s/ Charles B. O'Keeffe

11/19/2015

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).