FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
wasiiiigton,	D.C.	20049

STATEMENT	OF	CHANGES	IN BEN	IEFICIAL	OWNERS	HIP

OMB APPROVAL									
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).

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* Sundaram Preethi			<u>C</u>	2. Issuer Name and Ticker or Trading Symbol CATALYST PHARMACEUTICALS, INC. [CPRX]							. [(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify							
(Last) 355 ALH	(F IAMBRA (irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/08/2023							X Officer (give title below) Chief Strategy Officer							
SUITE 801				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) CORAL GABLES	S FI	L	33134				4,,,	_					Form fil Person	ed by More	e than	One Report	ng		
(City)	(S	tate)	(Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								satisfy						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 6. Ownership 7. Nature of 7. N									. Nature of										
Date (Month/D				Execution Date if any (Month/Day/Ye			r, Transaction Dis		sposed Of (D) (Instr. 3, 4 a			Securities Beneficia Owned Fo	s Formula (D) (I) (I) (I) (I) (I)	Form: (D) or	m: Direct I or Indirect E nstr. 4) C	Indirect Beneficial Ownership (Instr. 4)			
								Code	Amo	Amount (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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)						
				Code	v	(A)	(D)	Date Exercisable	Expirati Date	ion	Title	Amount or Number of Shares		(Instr. 4)	on(s)				
Options to purchase common stock	\$14.15	12/08/2023		A		143,193		(1)	12/08/20	030	Common Stock	143,193	\$0	557,02	27	D			
Restricted Stock Units	(2)	12/08/2023		A		20,565		(1)	(3)		Common Stock	20,565	\$0	577,59	92	D			

Explanation of Responses:

- 1. Derivative securities vest in equal tranches, 1/3rd on December 8, 2024, 1/3rd on December 8, 2025 and 1/3rd on December 8, 2026.
- 2. Each restricted stock unit represents a contingent right to receive one share of the Registrant's common stock upon vesting.
- 3. Shares of common stock will be delivered to the Reporting Person upon vesting.

/s/ Preethi Sundaram

12/12/2023

** 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.