FORM 4

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

Washington, D.C. 20549

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5           |
| obligations may continue. See          |
| Instruction 1(h)                       |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>COELHO PHILIP H</u>  |   |  |   |       |  | 2. Issuer Name and Ticker or Trading Symbol <u>CATALYST PHARMACEUTICAL</u> PARTNERS, INC. [ CPRX ] |        |                                     |  |                     |                  |                 |  |  | Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner |   |   |  |  |
|--|---|--|---|-------|--|--|--------|-------------------------------------|--|---------------------|------------------|-----------------|--|--|---|---|---|--|--|
| (Last) (First) (Middle) 355 ALHAMBRA CIRCLE, SUITE 1500  |   |  |   |       | 3. [   | 3. Date of Earliest Transaction (Month/Day/Year) 12/12/2012  |        |                                     |  |                     |                  |                 |  |  | Officer<br>below)   | (give title   |   | Other (s<br>below)   | pecify   |
| (Street) CORAL GABLES FL 33134   |   |  |   | 4.1   | 4. If Amendment, Date of Original Filed (Month/Day/Year) |  |        |                                     |  |                     |                  |                 |  | . Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |   |   |   |  |  |
| (City)   | (State) (Zip)   |  |   |       |  |  |        |                                     |  |                     |                  |                 |  |  |   |   |   |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |   |  |   |       |  |  |        |                                     |  |                     |                  |                 |  |  |   |   |   |  |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Da   |   |  |   |       | ear)   i   | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year)  |        | Transaction Dispose Code (Instr. 5) |  | ties Acquired (A) o |                  |                 | 5. Amount<br>Securities<br>Beneficial<br>Owned F<br>Reported | es Forr<br>ally (D) (Following (I) (I  |   | : Direct   C<br>Indirect   E<br>str. 4)   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
|  |   |  |   |       |  |  |        | Code                                | /  | Amount              | (A) or<br>(D)    |                 | ice  | Transact<br>(Instr. 3 a  | tion(s)   |   |   | msu. 4)  |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |  |   |       |  |  |        |                                     |  |                     |                  |                 |  |  |   |   |   |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution I<br>if any<br>(Month/Day | Date, | Code (   |  | of     |                                     | 6. Date Exercisa<br>Expiration Date<br>(Month/Day/Year |                     |                  | of Securities   |  |  | 3. Price of<br>Derivative<br>Security<br>Instr. 5)  | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | ve<br>es<br>ially<br>ng<br>d<br>tion(s)                           | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|  |   |  |   |       | Code   | v  | (A)    | (D)                                 | Date<br>Exercisable                                    |                     | xpiration<br>ate | Title           | Amo<br>or<br>Num<br>of<br>Shar                               | ber  |   |   |   |  |  |
| Options to<br>purchase<br>common<br>stock  | \$0.47  | 12/12/2012                                 |   |       | A  |  | 50,000 |                                     | 12/12/2012   | 1                   | 2/12/2017        | Common<br>Stock | 50,0   | 000  | \$0   | 145,00  | 0   | D  |  |

**Explanation of Responses:** 

/s/ Philip H. Coelho

12/14/2012

\*\* 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.