FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20049

| | OMB APPRO | VAL |
|---|-------------------------|-----------|
| I | OMB Number: | 3235-0287 |
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| | 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 | on 30(n) c | or the | investment | Comp | any Act | of 1940 | | | | | | |
|--|---|---------------------|---|---------|---|---|--|--------|--|---------------|--------------------|---|--|--|--|---|--|--|
| 1. Name and Address of Reporting Person* Tierney David S (Last) (First) (Middle) | | | | | <u>C</u> : | 2. Issuer Name and Ticker or Trading Symbol Catalyst Pharmaceutical Partners, Inc. [| | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
| | | | | | _ CI | PRX |] | | | | | | | (give title | Other (s | | | |
| 355 ALHAMBRA CIRCLE SUITE 1370 4.1 | | | | | | Date o | | Trans | action (Mor | ith/Da | ay/Year) | | | | | | | |
| (Street) CORAL GABLES FL | | | 33134 | | 4. 1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | | | |
| | | Tab | le I - Nor | n-Deriv | vativ | e Se | curities | s Ac | quired, C | ispo | osed o | f, or Be | neficial | ly Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | ear) i | 2A. Deemed Execution Date, if any (Month/Day/Year | | Transaction Dispose Code (Instr. 5) | | Disposed | ities Acquired (A) od Of (D) (Instr. 3, 4 | | Beneficia Owned F | es Formally (D) (Following (I) (I | orm: Direct 0) or Indirect) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | Code | v . | Amount | (A) or (D) | Price | Reported Transact (Instr. 3 a | on(s) | | Instr. 4) | | | |
| | | • | Table II - | | | | | | uired, Dis | | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | se (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount 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((Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Options to purchase common stock | \$0.9 | 10/20/2009 | | | A | | 30,000 | | 10/20/2009 | 10/ | /20/2014 | Common Stock | 30,000 | \$0 | 51,000 | D | | |

Explanation of Responses:

/s/ David S. Tierney

10/22/2009

** 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.

 $^{^{\}star}$ 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).