FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average burden								
l	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

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1. Name and Address of Reporting Person* <u>Winship M Douglas</u>					<u>C</u>	2. Issuer Name and Ticker or Trading Symbol CATALYST PHARMACEUTICAL PARTNERS, INC. [ CPRX ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify					
(Last) (First) (Middle) 355 ALHAMBRA CIRCLE, SUITE 1500					3. Date of Earliest Transaction (Month/Day/Year) 08/28/2014								X Officer (give title Offier (specify below)  VP, Regulatory Operations						
(Street) CORAL GABLES	S FI	FL 33134			4. 1	f Ame	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	/ativ	e Se	curities	s Ac	quired, [	Disp	osed o	f, or Be	neficia	lly Owne	b				
1. Title of Security (Instr. 3)				Date	ate Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Yea		r, Transaction Disposed Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4		Benefic Owned	es ially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(111511. 4)	
		•	Table II - I						uired, Di s, options					y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Date,	4. Transa Code ( 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)					8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares	1					
Options to purchase common stock	\$3.12	08/28/2014			A		25,000		08/28/2015	5 08	3/28/2021	Common Stock	25,000	\$0	372,500	)	D		
Options to purchase common stock	\$3.12	08/28/2014			A		25,000		08/28/2016	6 08	3/28/2021	Common Stock	25,000	\$0	397,500	)	D		
Options to purchase common	\$3.12	08/28/2014			A		25,000		08/28/2017	08	3/28/2021	Common Stock	25,000	\$0	422,500	0	D		

Explanation of Responses:

/s/ M. Douglas Winship

08/29/2014

\*\* 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> 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).