FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to

OMB APPROVAL OMB Number: Estimated average burden

Section obligat	n 16. Form 4 or ions may contir tion 1(b).	Form 5	d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940								ll l	ated av	erage burder sponse:	n 0.5			
1. Name and Address of Reporting Person* Miller Steve					2. Issuer Name and Ticker or Trading Symbol Catalyst Pharmaceutical Partners, Inc. [CPRX]							eck all applic Directo	able)	10%			
(Last) (First) (Middle 355 ALHAMBRA CIRCLE SUITE 1370			(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/05/2010							,	velopmei	nt & N	Manageme	ent	
(Street) CORAL GABLES FL 33134			33134		4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	•	(Zip)	-Deriv	ative Se	curities Ac	nuired	Dier	nosed o	f or Ben	eficiall	v Owned					
1. Title of Security (Instr. 3) 2. Trans			2. Transa	ction 2A. Deemed Execution Date,		3. Transa	3. 4. Securi Transaction Disposed Code (Instr. 5)		ties Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
		-				urities Acqı s, warrants						Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day		Date, Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Natur of Indired Beneficia Ownersh (Instr. 4)	

Explanation of Responses:

\$1.09

\$1.09

\$1.09

Options to purchase

stock Options to purchase

common

common

stock

stock Options to purchase

/s/ Steven Miller

Expiration Date

11/05/2015

11/05/2015

11/05/2015

Title

Common

Common

Stock

Stock

11/09/2010

Transaction(s) (Instr. 4)

210,000

230,000

250,000

D

D

D

** Signature of Reporting Person

Amount Number

of Shares

20,000

20,000

20,000

\$0

\$<mark>0</mark>

\$<mark>0</mark>

Date

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

11/05/2010

11/05/2010

11/05/2010

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.

of (D) (Instr. 3, 4 and 5)

(A)

20,000

20,000

20,000

Code

Α

Α

Date

Exercisable

11/05/2010

11/05/2011

11/05/2012

(D)

^{*} 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).