FORM 4

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

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>
O 17 (1 = 101=14 1	0. 0.0.000		O 1111E1101111

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average	ourden										
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)

Check this box to indicate that a Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. 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*  INGENITO GARY  (Last) (First) (Middle)  355 ALHAMBRA CIRCLE, SUITE 801  (Street)  CORAL GABLES  FL  33134						2. Issuer Name and Ticker or Trading Symbol CATALYST PHARMACEUTICALS, INC.  [ CPRX ]  3. Date of Earliest Transaction (Month/Day/Year)  11/20/2024  4. If Amendment, Date of Original Filed (Month/Day/Year)							C. (Cr	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify below)  Chief Med. & Reg. Officer  6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person				
(City)	(S:	tate)	(Zip)															
		Tab	le I - N	lon-Deri	ivativ	e Sec	curit	ies Ac	quire	d, Di	sposed o	f, or Be	neficial	ly Own	d			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/						Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquire Disposed Of (D) (Inst				Secu Bene Owne	5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D)	Price	Trans	action(s) 3 and 4)	ction(s)		(50. 4)	
Common stock, par value \$0.001 per share 11/20/20					2024	24		М		38,000	A	\$4.01		39,391		D		
Common stock, par value \$0.001 per share 11/20/20				2024	24 s 38,000 <sup>(1)</sup> D \$2			\$21.199	99 <sup>(2)</sup> 51,391			D						
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)		4. Transa Code ( 8)				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)		e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares					
Options to purchase common stock	\$4.01	11/20/2024			M			38,000	(3)	)	01/02/2025	Common Stock	38,000	\$0	912,57	75	D	

## Explanation of Responses:

- 1. Shares were sold on the open market for personal reasons and not as a result of any disagreement with the Company.
- 2. Represents a weighted average price for the shares sold. Shares were sold in various lots ranging from \$21.18 to \$21.27 per share.
- 3. Options vested in three annual tranches beginning on January 2, 2019.

/s/ Gary Ingenito

11/22/2024

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

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.