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(b).

STATEMENT OF CHAPTER OF CH

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

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

Name and Address of Reporting Person*     Miller Steve						2. Issuer Name and Ticker or Trading Symbol CATALYST PHARMACEUTICAL PARTNERS, INC. [ CPRX ]								. 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) 12/12/2012								Chief Operating Officer				
(Street) CORAL GABLES	S FI	L	33134	4.								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)														
Date			ransactio	ansaction 2 th/Day/Year) if		ed Date	3. Transact	ion	4. Securi	ties Acquired (A) or d Of (D) (Instr. 3, 4 a		5. Amour Securitie Beneficia Owned F	nt of s ally ollowing	Form (D) o	r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	<i>,</i>	Amount	nt (A) or Pr		Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)
		-	Гable II - Der (e.g					uired, Dis s, options					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 Date, if any (Month/Day/Yea	Code (Ins				6. Date Exercisa Expiration Date (Month/Day/Yea			of Securit Underlyin Derivative	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable		piration ate	Title	Amount or Number of Shares					
Options to purchase common stock	\$0.47	12/12/2012		A		66,666		12/12/2012	12	/12/2017	Common Stock	66,666	\$0	406,66	6	D	
Options to purchase common stock	\$0.47	12/12/2012		A		66,667		12/12/2013	12	/12/2017	Common Stock	66,667	\$0	473,33	i3	D	
Options to purchase common	\$0.47	12/12/2012		A		66,667		12/12/2014	12	/12/2017	Common Stock	66,667	\$0	540,00	00	D	

**Explanation of Responses:** 

/s/ Steve Miller

12/14/2012

\*\* 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).