FORM 4

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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
----------------------------------------------

OMB APPROVAL									
OMB Number:	3235-0287								
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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

1. Name and Address of Reporting Person*  DENKHAUS DONALD A				<u>C</u> A	2. Issuer Name and Ticker or Trading Symbol CATALYST PHARMACEUTICALS, INC. CPRX								(Che	eck all applic	cable) or	g Pers	son(s) to Issi 10% Ow	ner	
(Last)	(Fi	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/27/2023									Officer below)	r (give title )		Other (s below)	pecify
SUITE 801				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person					
(Street) CORAL GABLES	, FI	۔ ۔	33134												-	iled by Mor		n One Repor	- 1
	•				.  Ru	ıle 1	0b5	5-1(c	) Tran	sact	ion Inc	dicatio	n						
(City) (State) (Zip)						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Date,			Code	Transaction Disposed Of (D) (Instance Code (Instr. 5)					Securitie Benefici	5. Amount of Securities Beneficially Owned Following		r Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) (D)	or	Price	Transaci (Instr. 3	tion(s)			msu. 4)	
Common Stock, par value \$0.001 per share 12/27/				7/2023	3			М		1,33	3 A	A		394	94,333		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)  1. Title of Conversion On Exercise Price of Derivative Security  Output  Output					Transaction of Code (Instr. Derivative		vative urities uired or posed o) tr. 3, 4	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(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nu of	umber					
Restricted Stock Units	(1)	12/27/2023			M			1,333	(2)		(3)	Common	1	,333	\$0	232,93	1	D	

## **Explanation of Responses:**

- 1. Each restricted stock unit represents a contingent right to receive one share of the Registrant's common stock upon vesting.
- 2. Derivative securities vest in equal tranches, 1/3rd on December 27, 2023, 1/3rd on December 27, 2024 and 1/3rd on December 27, 2025.
- 3. Shares of common stock are required to be delivered to the Reporting Person within sixty days of vesting. The first tranche of shares was delivered on December 27, 2023.

12/29/2023 /s/ Donald A. Denkhaus

\*\* Signature of Reporting Person Date

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

- \* 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.