FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	
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OMB APPR	OVAL
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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).

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	struction 10.	Reporting Person*			2. Is	ssuer	Name	and Tid	ker or T	ading	Symbol		5	Relat	tionship (of Reportin	ıg Perso	on(s) to Iss	uer	
Name and Address of Reporting Person* INGENITO GARY						2. Issuer Name and Ticker or Trading Symbol CATALYST PHARMACEUTICALS, INC. CPRX								(Check all applicable) Director 10% Owner						
(Last) (First) (Middle)															below)		below)		pecity	
355 ALH	IAMBRA (3. Date of Earliest Transaction (Month/Day/Year) 12/27/2024									Chi	et Med. d	& Reg	g. Officer					
(Street) CORAL GABLES	S FI		33134		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(Si	tate) ((Zip)												Persor	1				
		Tabl	le I - Noı	n-Deriv	ative	Sec	curiti	ies Ac	quire	, Dis	sposed	of, or Be	enefici	ally (Owned	ŀ				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ar) l	2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.		n Dispose			nd	5. Amount of Securities Beneficially Owned Following		Form:	Direct Cluber of tr. 4)	7. Nature of Indirect Beneficial Ownership		
									Cod	v	Amount	(A) (D)	or Pric	. 1	Reported Transact (Instr. 3	tion(s)			Instr. 4)	
Common Stock, par value \$0.001 per share 12/27/					7/2024	/2024		M		9,00	00 A	. (.)	64,849		D				
Common Stock, par value \$0.001 per share 12/27/				7/2024	/2024		F		3,54	1 D	(:	2)	61,308		D					
		Т	able II -									f, or Ber ible sec			wned					
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. Transaction Code (Instr. 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title ar Amount of Securitie Underlyin Derivativ (Instr. 3 a	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. Natur of Indired Beneficia Ownersh (Instr. 4)		
					Code	v	(A)		Date Exercis		Expiration Date	Title	Amour or Number of Shares	r						
Restricted Stock Units	(1)	12/27/2024			M			9,000	(3)		(4)	Common Stock	9,000		\$0	1,025,2	82	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. Shares withheld by the Registrant to satisfy applicable withholding taxes upon vesting of restricted stock units.
- 3. 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.
- 4. Shares of common stock are required to be delivered to the Reporting Person within sixty days of vesting. The second tranche of shares was delivered on December 27, 2024.

12/31/2024 /s/ Gary Ingenito

** 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.