#### Edgar Filing: CATALYST PHARMACEUTICAL PARTNERS, INC. - Form 4

#### CATALYST PHARMACEUTICAL PARTNERS, INC.

Form 4

March 30, 2015

## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to

Issuer

DENKHAUS DONALD A

Symbol

CATALYST PHARMACEUTICAL PARTNERS, INC. [CPRX]

(Check all applicable)

(Last)

(City)

(First) (Middle) 3. Date of Earliest Transaction

X\_ Director 10% Owner

(Month/Day/Year)

03/27/2015

Officer (give title Other (specify

355 ALHAMBRA CIRCLE, SUITE

(Street)

(State)

1500

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

below)

CORAL GABLES, FL 33134

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

(Zip)

4. Securities Acquired 5. Amount of Transaction(A) or Disposed of Code (D) (Instr. 3, 4 and 5) (Instr. 8)

6. Ownership 7. Nature of Securities Form: Direct Indirect Beneficially (D) or Beneficial Ownership Owned Indirect (I) (Instr. 4) Following (Instr. 4)

Reported (A) or

Transaction(s)

Price Code V Amount (D)

(Instr. 3 and 4)

Common

stock, par value

03/27/2015

P 5,000 A 5,000

D

\$0.001 per share

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

1

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#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative | 2. Conversion                            | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4.<br>Transacti | 5.<br>orNumber | 6. Date Exerc<br>Expiration D |                    | 7. Title<br>Amount                           |  | 8. Price of Derivative | 9. Nu<br>Deriv  |
|------------------------|--|--------------------------------------|-------------------------------|-----------------|----------------|-------------------------------|--------------------|--|--|------------------------|---|
| Security (Instr. 3)    | or Exercise Price of Derivative Security | (mema zujy 1 cur)                    | any<br>(Month/Day/Year)       | Code (Instr. 8) | of             | (Month/Day/Year)              |                    | Underlying<br>Securities<br>(Instr. 3 and 4) |  | Security (Instr. 5)    | Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|                        |  |                                      |                               | Code V          | (A) (D)        | Date<br>Exercisable           | Expiration<br>Date | Title N                                      | Amount<br>or<br>Number<br>of<br>Shares |                        |   |

# **Reporting Owners**

| Reporting Owner Name / Address   | Relationships |           |         |       |  |  |  |
|--|---------------|-----------|---------|-------|--|--|--|
|  | Director      | 10% Owner | Officer | Other |  |  |  |
| DENKHAUS DONALD A<br>355 ALHAMBRA CIRCLE<br>SUITE 1500<br>CORAL GABLES, FL 33134 | X             |           |         |       |  |  |  |

## **Signatures**

/s/ Donald A. 03/30/2015 Denkhaus

\*\*Signature of Reporting Date

### **Explanation of Responses:**

- 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2