

Elsbernd Brian  
 Form 3  
 January 04, 2019

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL  
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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Elsbernd Brian		(Month/Day/Year)	CATALYST PHARMACEUTICALS, INC. [CPRX]	
(Last)	(First)	(Middle)	12/27/2018	
355 ALHAMBRA			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
CIRCLE,Â SUITE 1250				
(Street)			(Check all applicable)	
CORAL GABLES,Â FLÂ 33134			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	6. Individual or Joint/Group Filing(Check Applicable Line)
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)	<input checked="" type="checkbox"/> Form filed by One Reporting Person
			Chief Compliance/Legal Officer	<input type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

**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 control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable      Expiration Date	Title      Amount or Number of Shares			

(Instr. 5)

Options to purchase Common Stock	Â <u>(1)</u>	02/16/2023	Common Stock	65,000	\$ 1.85	D	Â
Options to purchase Common Stock	Â <u>(2)</u>	06/15/2023	Common Stock	40,000	\$ 0.79	D	Â
Options to purchase Common Stock	Â <u>(3)</u>	01/03/2024	Common Stock	50,000	\$ 1.13	D	Â
Options to purchase Common Stock	Â <u>(4)</u>	01/02/2025	Common Stock	60,000	\$ 4.01	D	Â
Options to purchase Common Stock	Â <u>(5)</u>	12/19/2025	Common Stock	225,000	\$ 2.24	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Elsbernd Brian 355 ALHAMBRA CIRCLE SUITE 1250 CORAL GABLES, FL 33134	Â	Â	Â Chief Compliance/Legal Officer	Â

## Signatures

/s/ Brian  
Elsbernd

01/04/2019

\_\_Signature of  
Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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).
- (1) Options have vested or will vest in three equal tranches on February 16, 2017, 2018 and 2019.
- (2) Options vested in two equal tranches on June 16, 2017 and 2018.
- (3) Options have vested or will vest in three equal tranches on January 3, 2018, 2019 and 2020.
- (4) Options will vest in three equal tranches on January 2, 2019, 2020 and 2021.
- (5) Options will vest in three equal tranches on December 19, 2019, 2020 and 2021.

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.