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CATALYST Form 4/A November 04	[°] PHARMACEU 4 2014	TICAL PA	ARTNE	RS, INC							
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB A	OMB APPROVAL		
	UNITED	STATES		AND EX 1, D.C. 2		E COMMISSIO	N OMB Number:	3235-02	87		
Check thi if no long subject to Section 1 Form 4 o Form 5		F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934,					Estimated burden ho response	Lanuary 31Expires:2005Estimated averageburden hours perresponse0.5			
obligation may cont <i>See</i> Instru 1(b).	inue. Section 17(•	•	mpany Act	t of 1935 or Secti 1940	on			
(Print or Type F	Responses)										
1. Name and A MCENANY	Person [*]	2. Issuer Name and Ticker or Trading Symbol CATALYST PHARMACEUTICA PARTNERS, INC. [CPRX]			5. Relationship of Reporting Person(s) to Issuer						
						(Check all applicable)					
(Last) (First) (Middle) 3. Date of Earliest (Month/Day/Year)					Fransaction	nsactionX_ Director10% Owner X_ Officer (give title Other (specify below) below)					
				(0, 1, 0, 1, 0, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,					ident and CEO		
Filed(Mont				iled(Month/Day/Year) Applicable Line) 9/02/2014 Form filed by 0 Form filed by N			y One Reporting F	oint/Group Filing(Check One Reporting Person More than One Reporting			
(City)	(State)	(Zip)	Tab	le I - Non-	Derivativ	e Securities A	Person Acquired, Disposed	of, or Beneficia	ally Owned		
	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	d (A) or d of (D) , 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Rep	ort on a separate line	e for each cla	uss of sec	urities bene	eficially ov						
I					Pers infor requ	ons who re mation con ired to resp lays a curre	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)		
	Tab	le II - Deriv	ative Sec	urities Ac	quired, Di	isposed of, or	· Beneficially Owne	d			

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) of Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A) (D) Date Exercisable	Expiration Date	Title	Amount Number Shares
Options to purchase common stock	\$ 3.12	08/28/2014		А	100,000 (1)	08/28/2015	08/28/2021	Common Stock	100,00
Options to purchase common stock	\$ 3.12	08/28/2014		А	100,000 (1)	08/28/2016	08/28/2021	Common Stock	100,00
Options to purchase common stock	\$ 3.12	08/28/2014		A	100,000 (1)	08/28/2017	08/28/2021	Common Stock	100,00

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
MCENANY PATRICK J 355 ALHAMBRA CIRCLE, SUITE 1500 CORAL GABLES, FL 33134	Х		President and CEO			
Clauseturee						

Signatures

Reporting Person

/s/ Patrick J. 11/04/2014 **McEnany** **Signature of

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).

On August 28, 2014, the Reporting Person was granted 460,000 options to purchase shares of the Registrant's Common Stock. Subsequently, the Company determined that the Reporting Person had inadvertently been issued more options than are allowed to be

issued to any one individual in any one fiscal year under the Registrant's 2014 Stock Incentive Plan. The Reporting Person has agreed, for (1) no additional consideration, and effective as of the date the options were granted, to the cancellation of that portion (160,000) of the options originally granted to him in excess of the amount allowed to be granted under the Plan. The options reported above are the corrected amount of the options granted to the Reporting Person on August 28, 2014.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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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.