

Catalyst Pharmaceutical Partners, Inc.  
 Form 4  
 October 27, 2008

**FORM 4**

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

OMB APPROVAL

OMB Number: 3235-0287  
 Expires: January 31, 2005  
 Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN 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 \*  
**COELHO PHILIP H**

2. Issuer Name and Ticker or Trading Symbol  
**Catalyst Pharmaceutical Partners, Inc. [CPRX]**

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
 355 ALHAMBRA CIRCLE, SUITE 1370  
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)  
 10/23/2008

Director  10% Owner  
 Officer (give title below)  Other (specify below)

CORAL GABLES, FL 33134

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

(City) (State) (Zip)

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
				(A) or (D)	Price		
Common Stock, par value \$0.001 per share	10/23/2008		P	500	A \$ 2.681	252,682	D
Common Stock, par value \$0.001 per share	10/23/2008		P	100	A \$ 2.684	252,782	D
	10/23/2008		P	200	A \$ 2.69	252,982	D

Edgar Filing: Catalyst Pharmaceutical Partners, Inc. - Form 4

Common  
Stock, par  
value  
\$0.001 per  
share

Common  
Stock, par  
value  
\$0.001 per  
share

Common  
Stock, par  
value  
\$0.001 per  
share

Common  
Stock, par  
value  
\$0.001 per  
share

Common  
Stock, par  
value  
\$0.001 per  
share

Common  
Stock, par  
value  
\$0.001 per  
share

10/23/2008

P

200

A

\$ 2.72 253,182

D

10/27/2008

P

100

A

\$ 2.602 253,282

D

10/27/2008

P

100

A

\$ 2.611 253,382

D

10/27/2008

P

200

A

\$ 2.683 253,582

D

10/27/2008

P

100

A

\$ 2.701 253,682

D

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

**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.**

SEC 1474  
(9-02)

**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)	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)	5. Number of Derivative Securities Acquired (A) or Disposed of (D)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned (Instr. 6)
--	--	--------------------------------------	--	--------------------------------	--	--	---	--	--

(Instr. 3,  
4, and 5)

Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
------	---	-----	-----	---------------------	--------------------	-------	--

## Reporting Owners

### Reporting Owner Name / Address

### Relationships

Director    10% Owner    Officer    Other

COELHO PHILIP H  
355 ALHAMBRA CIRCLE, SUITE 1370    X  
CORAL GABLES, FL 33134

## Signatures

/s/ Philip Coelho                      10/27/2008

\_\_Signature of                      Date  
Reporting Person

## 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.