Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |       |  |  |  |  |  |  |  |  |  |  |
|--------------------------|-------|--|--|--|--|--|--|--|--|--|--|
| OMB Number: 3235-028     |       |  |  |  |  |  |  |  |  |  |  |
| Estimated average burden |       |  |  |  |  |  |  |  |  |  |  |
| hours per response       | : 0.5 |  |  |  |  |  |  |  |  |  |  |

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

| 1. Name and Address of Reporting Person*                                      |   |         |   |           |                 | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Travere Therapeutics, Inc. [ TVTX ] |        |  |                     |  |                    |            | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |  |                                  |  |  |   |            |
|---|---|---------|---|-----------|-----------------|--|--------|--|---------------------|--|--------------------|------------|---|--|----------------------------------|--|--|---|------------|
| <u>Dube Eric M</u>  |   |         |   |           | 110             | Travere incrupeduces, inc. [ 1 v 1A ]  |        |  |                     |  |                    |            | X   | Direc  | tor                              | 10% Owner  |  | wner  |            |
| (Last)  | (Fi   | rst) (N | Middle)                                 |           | 3. Da           | Date of Earliest Transaction (Month/Day/Year)  |        |  |                     |  |                    |            |   | X  | Office<br>belov                  | icer (give title<br>low)   |  | Other (<br>below)                                   | specify    |
| C/O TRAVERE THERAPEUTICS, INC.  |   |         |   |           | 01/2            | 01/24/2022   |        |  |                     |  |                    |            |   | Chief Executiv   |                                  |  | Officer  |   |            |
| 3611 VALLEY CENTRE DR., SUITE 300   |   |         |   |           |                 |  |        |  |                     |  |                    |            |   |  |                                  |  |  |   |            |
|   |   |         |   |           |                 | 4. If Amendment, Date of Original Filed (Month/Day/Year)                               |        |  |                     |  |                    |            | 6. Individual or Joint/Group Filing (Check Applicable                   |  |                                  |  |  |   |            |
| (Street)  |   |         |   |           |                 |  |        |  |                     |  |                    |            |   | Line)  | Form                             | filed by On  | e Ren  | ortina Pers   | on         |
| SAN DII   | EGO CA  | A 9     | 2130                                    |           |                 |  |        |  |                     |  |                    |            |   | Λ  |                                  | filed by Mo  |  | Ü   |            |
| (City)  | (6)   | ata) (7 | 7in\                                    |           |                 |  |        |  |                     |  |                    |            |   |  | Perso                            |  |  | ,   |            |
| (City)  | (5)   | ate) (2 | Zip)                                    |           |                 |  |        |  |                     |  |                    |            |   |  |                                  |  |  |   |            |
|   |   | Table   | I - No                                  | n-Deriva  | tive S          | Secu   | rities | Acq  | uired,              | Dis  | posed of           | , or E     | Benefi  | icially  | y Own                            | ed   |  |   |            |
| 1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)                |   |         |   |           | Execution Date, |  |        | 3.<br>Transaction<br>Code (Instr.<br>8)  4. Securities A<br>Disposed Of (I<br>5) |                     |  |                    |            | 4 and Securi<br>Benefi<br>Owned   |  | ties<br>cially<br>Following      | Form<br>(D) o  | n: Direct<br>r Indirect<br>sstr. 4)                                | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |            |
|   |   |         |   |           |                 |  |        |  | Code                | v  | Amount             | (A) or (D) |   | се   | Transa                           | Reported<br>Transaction(s)<br>(Instr. 3 and 4)                           |  |   | (Instr. 4) |
| Common Stock 01/24/20   |   |         |   |           | 2022            |  |        |  | S <sup>(1)</sup>    |  | 7,873              | D          | \$2   | 24.98  | 13                               | 31,710   |  | D   |            |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned |   |         |   |           |                 |  |        |  |                     |  |                    |            |   |  |                                  |  |  |   |            |
|   |   |         |   | (e.g., pu | ıts, ca         | alls, v  | warra  | ants,  | optio               | ns, c  | onvertib           | le se      | curiti  | es)  |                                  |  |  |   |            |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                           | 2. Conversion Or Exercise Price of Derivative Security  3. Transaction Date Execution Date, if any (Month/Day/Year) |         | 4.<br>Transaction<br>Code (Instr.<br>8) |           | of<br>Deriv     | r<br>osed<br>)<br>: 3, 4   |        | ion Da   | ite                 | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Ins<br>3 and 4) |                    | De Se (In  | Price of<br>rivative<br>curity<br>str. 5)                               | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | ly Ow<br>For<br>Oir<br>Or<br>(I) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |            |
|   |   |         |   |           | Code V          |  | (A)    | (D)  | Date<br>Exercisable |  | Expiration<br>Date | Title      | of<br>Shares  |  |                                  |  |  |   |            |

## **Explanation of Responses:**

1. The sales reported in this Form 4 were made pursuant to a written plan meeting the requirements of Rule 10b5-1(c) of the Securities Exchange Act of 1934, as amended, and includes the sale of shares to cover the tax obligation that occurred upon the vesting of restricted stock units.

## Remarks:

/s/ Elizabeth E. Reed, 01/26/2022 Attorney-in-Fact

\*\* 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.