SEC Form 4	
FORM	4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative
defense conditions of Rule 10b5-
1(c). See Instruction 10.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL									
OMB Number:	3235-0287								

Estimated average burden hours per response: 0.5

1. Name and Address of Reporting Person [*] Cline Christopher R.		2. Issuer Name and Ticker or Trading Symbol <u>Travere Therapeutics, Inc.</u> [TVTX]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
		<u>Interesting outros, inc.</u> [IVIX]	Director 10% Owner				
		-	Officer (give title Other (specify below)				
(Last) (First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 09/05/2024	CHIEF FINANCIAL OFFICER				
C/O TRAVERE THERAPEUT	ICS, INC.	09/03/2024					
3611 VALLEY CENTRE DRIV	/E, STE 300						
		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable				
(Street)			Line)				
SAN DIEGO CA	92130		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)						Securities Beneficially	Form: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(11150. 4)
Common Stock	09/05/2024		A ⁽¹⁾		6,750	A	\$ <mark>0</mark>	77,085	D	
Common Stock	09/09/2024		S ⁽²⁾		2,490	D	\$11.52	74,595	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, cans, 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. Transa Code (8)		of E		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		f Expiration Date (Month/Day/Year) eccurities cquired A) or lisposed f (D) instr. 3, 4		Expiration Date		Amount of		Amount of Derivative Security (Instr. 5) Derivative Security (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares										

Explanation of Responses:

1. On January 31, 2023, the reporting person was granted performance restricted stock units (PSUs) covering 6,750 shares of the Issuer's common stock, which vest upon the satisfaction of certain performance criteria. On September 5, 2024, the PSUs vested upon the Issuer's confirmation that the U.S. Food and Drug Administration (FDA) had granted full approval to FILSPARI (sparsentan) in IgA Nephropathy.

2. Represents the number of shares required to be sold by the Reporting Person to cover the tax withholding obligation in connection with the settlement of vested performance restricted stock units. This sale is mandated by the Issuer's election under its equity incentive plans to require the Reporting Person to fund this tax withholding obligation by completing a "sell to cover" transaction with a brokerage firm designated by the Issuer. This sale does not represent a discretionary trade by the Reporting Person.

/s/ Elizabeth E. Reed,

Attorney-in-Fact

<u>09/09/2024</u>

** 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.