FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

UIVID APPR	OVAL
OMB Number:	3235-0287
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Check this box if no longer subject to 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-

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

	ee Instructions		ile 1000-																	
Name and Address of Reporting Person*     Heerma Peter				2. Issuer Name and Ticker or Trading Symbol Travere Therapeutics, Inc. [ TVTX ]							5. Relationship of Reportin (Check all applicable) Director Officer (give title			10% Ow		vner				
(Last) (First) (Middle) C/O TRAVERE THERAPEUTICS, INC. 3611 VALLEY CENTRE DRIVE, SUITE 300					3. Date of Earliest Transaction (Month/Day/Year) 09/05/2024								Officer (give title Other (specify below)  CHIEF COMMERCIAL OFFICER							
(Street) SAN DIEGO CA 92130 (City) (State) (Zip)					4. If <i>F</i>	4. If Amendment, Date of 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						
			Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or B	ene	ficiall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (AD Disposed Of (D) (Instr. 3D)			4 and Securitie Beneficia		ies cially Following	Form (D) or	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
										Code	v	Amount	(A) o (D)	P P	rice	Transa	eu ction(s) 3 and 4)			(111501.4)
Common Stock 09/05/2					2024			A <sup>(1)</sup>		6,750	A		\$ <mark>0</mark>	110	),149 <sup>(2)</sup> D		D			
Common Stock 09/09/2					2024				S <sup>(3)</sup>		2,191	D	\$	11.52 107,958		7,958	D			
	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	on C	3. Transaction Date Month/Day/Year)	if any	emed on Date, /Day/Year)	4. Transa Code ( 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instrand 5	rities ired sed	6. Date Expirat (Month/	ion Da		7. Title Amou Securi Under Deriva Securi 3 and	nt of ities lying itive ity (Ins	De Se (Ir	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **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.

Exercisable

Date

2. Includes 3,896 shares of Common Stock that were acquired by the Reporting Person on May 31, 2024 pursuant to the Issuer's Employee Stock Purchase Plan.

Code V

(A) (D)

3. 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 09/09/2024

\*\* Signature of Reporting Person Date

of Shares

Title

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.