FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
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	STATEMENT OF CHANGES IN BENEFICIAL OWN
Instruction 1(b).	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* <u>Clague Laura</u>														ationship of Reporting P c all applicable) Director Officer (give title below) Chief Financi		10% Ow Other (s	ner	
	Last) (First) (Middle) C/O TRAVERE THERAPEUTICS, INC. B611 VALLEY CENTRE DR., SUITE 300															below) al Officer		
(Street) SAN DIEGO CA 92130				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	•	(Zip)															
Date (Montr			nsaction n/Day/Yo	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transac Code (li 8)	tion	4. Securities Acquire Disposed Of (D) (Inst 5) Amount (A) or (D) 15,000 A		red (A) or str. 3, 4 and	5. Amou Securiti Benefici Owned Reporte Transac (Instr. 3	nt of es ally Following d tion(s)	Form (D) or (I) (Instance)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
		-	Table II -						uired, Di , option:	•	,		,	Owned			'	
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)	Date,	4. Transaction Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Yea		of Securities		ties ig e Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares					
Employee stock option (right to buy)	\$26.88	01/21/2021			A		57,500		(2)	0:	1/20/2031	Common Stock	57,500	\$0.00	57,500	0	D	

Explanation of Responses:

- $1. \ Acquisition \ of \ restricted \ stock \ units \ pursuant \ to \ the \ Issuer's \ Equity \ Incentive \ Plan \ that \ are \ scheduled \ to \ vest \ over \ four \ years.$
- 2. One-fourth of the shares subject to the stock option vest and become exercisable on the first anniversary of the date of grant, and the remaining shares vest in 36 equal monthly installments thereafter.

Remarks:

/s/ Elizabeth E. Reed, Attorney-01/25/2021 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.