SEC Form 4	
FORM	4

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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						
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defense co	satisfy the affirmative nditions of Rule 10b5- nstruction 10.			
Dube Eric (Last) C/O TRAVI	Address of Reporting <u>M</u> (First) ERE THERAPEU EY CENTRE DF	(Middle) ITICS, INC.	2. Issuer Name and Ticker or Trading Symbol <u>Travere Therapeutics, Inc.</u> [TVTX] 3. Date of Earliest Transaction (Month/Day/Year) 09/05/2024	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
(Street) SAN DIEG (City)	O CA (State)	92130 (Zip)	 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 - 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)	Date, (Code (Instr. 5) (Near) 20 (Code (Instr. 5) (Near		Disposed Of (D) (Instr. 3, 4 and		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	09/05/2024		A ⁽¹⁾		32,500	A	\$ <mark>0</mark>	383,100	D	
Common Stock	09/09/2024		S ⁽²⁾		21,125	D	\$11.52	361,975	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (a.g., pute, calle, warrante, options, convertible securities)

	(e.g., pı	uts, calls, v	warrants,	options, convertib	le securities	5)	
tion	34 Deemed	4	5 Number	6 Date Exercisable and	7 Title and	8 Price of	9 Ni

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 Deriv	r osed) r. 3, 4	6. Date Exerc Expiration Da (Month/Day/Y	ate	7. Titl Amou Secur Unde Deriv Secur 3 and	int of rities rlying ative rity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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 32,500 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. This sale was made pursuant to a written plan adopted on March 15, 2024 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 performance restricted stock units.

<u>/s/</u>	Elizabeth	n E. Reed,	
At	torney-in-	-Fact	

** Signature of Reporting Person Date

09/09/2024

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.