SEC Form 4	
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## FORM 4

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)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

0.5

Obligations ma Instruction 1(b)	ay continue. See		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934		hours	s per response:	
X	,		or Section 30(h) of the Investment Company Act of 1940				
1. Name and Add <u>Heerma Pet</u>	1 0	Person*	2. Issuer Name <b>and</b> Ticker or Trading Symbol Retrophin, Inc. [ RTRX ]		ationship of Reportir < all applicable) Director Officer (give title	ng Person(s) to Issuer 10% Owner Other (specif	fy
(Last) C/O RETROP	,	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/31/2020		below) Chief Com	below) mercial Officer	
3721 VALLEY	CENTRE DR	IVE, SUITE 200	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	vidual or Joint/Grou	p Filing (Check Applicab	le
(Street) SAN DIEGO	CA	92130		X	2	ne Reporting Person ore than One Reporting	
(Citv)	(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)	Code (	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)				Form: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)
		Code V Amount (A) or (D) Pri		Price	Transaction(s) (Instr. 3 and 4)		(11301 4)		
Common Stock	01/31/2020		Α	9,000	Α	\$0.00	44,000	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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (II 3, 4 and	ve es ed ed nstr.	6. Date Exerc Expiration Da (Month/Day/Y	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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				
Employee stock option (right to buy)	\$15.46	01/31/2020		A		55,000		(1)	01/30/2030	Common Stock	55,000	\$0.00	55,000	D	
Performance- based restricted stock units	(2)	01/31/2020		A		9,000		(3)	(3)	Common Stock	9,000	\$0.00	9,000	D	

#### **Explanation of Responses:**

1. 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.

2. Each restricted stock unit represents a contingent right to receive one share of the Common Stock of the Issuer.

3. This grant will vest upon the later of (i) 12 months from the date of grant and (ii) the achievement of specified clinical and regulatory development milestones, provided that the grant will expire on January 31, 2024 to the extent the specified clinical and regulatory milestones are not achieved by such date.

**Remarks:** 

# <u>/s/ Elizabeth E. Reed, Attorney-</u> 01/31/2020

in-Fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $\ast$  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.