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						
Estimated average burden							
hours per response:	0.5						

	atisfy the affirmative itions of Rule 10b5- ruction 10.			
<u>Inrig Jula</u>	Iress of Reporting		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) Director 10% Owner Officer (give title Other (specify below) below)
(Last)(First)(Middle)C/O TRAVERE THERAPEUTICS, INC.3611 VALLEY CENTRE DRIVE, SUITE 300			3. Date of Earliest Transaction (Month/Day/Year) 09/10/2024	CHIEF MEDICAL OFFICER
(Street) SAN DIEGO (City)	CA (State)	92130 (Zip)	<ul> <li>4. If Amendment, Date of Original Filed (Month/Day/Year)</li> </ul>	<ul> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> <li>Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting Person</li> </ul>
	(State)	( <sup>(</sup> -')		

## 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)	3. Transa Code ( 8)					Securities Beneficially		7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	09/10/2024		<b>S</b> <sup>(1)</sup>		684	D	\$12.98	61,949	D	

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(c.g., puis, calls, warrants, options, convertible securities)															
1. Tit Deriv Secu (Instr	rity or Contriction Contriction Contribution	onversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Deriv Secu Acqu (A) of Dispo of (D) (Instr	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		on Date Amount of Day/Year) Securities Underlying Derivative		piration Date Amount of Derivative onth/Day/Year) Securities Security Underlying (Instr. 5) Derivative Security (Instr.		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. This sale was made pursuant to a written plan adopted 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 that vested on September 5, 2024.

/s/ Elizabeth E. Reed. Attorney-in-Fact

09/10/2024

\*\* 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.