FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

ashington, D.C. 20549	1			

washington, D.C. 20049	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287		

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See 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

	OMB APPROVAL										
	OMB Number: 3235-028										
ı	Estimated average burden										
	hours per response:	0.5									

1. Name and Address of Reporting Person*  Baynes Roy D.						2. Issuer Name and Ticker or Trading Symbol  Travere Therapeutics, Inc. [ TVTX ]								Relationship leck all appli X Directo	cable)	g Pers	son(s) to Issa 10% Ow		
(Last)	,	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/17/2023								Officer below)	(give title		Other (s below)	pecify	
C/O TRAVERE THERAPEUTICS, INC. 3611 VALLEY CENTRE DR., SUITE 300				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						Lin	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person							
(Street) SAN DII	EGO C	A	92130											Form f Persor		e thar	n One Repor	ting	
(City)	(S	itate)	(Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In								nt to a con						
		Tab	le I - Nor	n-Deriv	/ative	Se	curitie	s Ad	cquired, I	Dis	posed o	f, or Be	neficial	ly Owned	i				
1. Title of Security (Instr. 3)  2. Transa Date (Month/Date)						Execution Date,			Code (Instr. 5)			(Instr. 3, 4 and Section Secti		ties Form cially (D) ( I Following (I) (I		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	Amount (A) or (D)		Transac	Reported Transaction(s) (Instr. 3 and 4)			Instr. 4)		
Common	Stock <sup>(1)</sup>			05/17	7/2023	2023		A		4,500 <sup>(2)</sup> A		\$0.0	0 24,500			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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any Coc			Transac Code (In	sunsaction de (Instr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)			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						
Stock option (right to buy) <sup>(1)</sup>	\$17.11	05/17/2023			A		13,500		05/17/2024 <sup>(</sup>	2) (	05/16/2033	Common Stock	13,500	\$0.00	13,500	)	D		

## **Explanation of Responses:**

- 1. Automatic equity grant under the Issuer's 2018 Equity Incentive Plan, as amended, pursuant to the non-employee director compensation program.
- 2. The equity award vests over a one year period.

## Remarks:

/s/ Elizabeth E. Reed, Attorney-05/19/2023

\*\* Signature of Reporting Person

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.