FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| 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 Instruction 1(b).

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

| 1. Name and Address of Reporting Person* Khattar Jack A. (Last) (First) (Middle) C/O SUPERNUS PHARMACEUTICALS, INC. 1550 EAST GUDE STREET | | | | | | 2. Issuer Name and Ticker or Trading Symbol SUPERNUS PHARMACEUTICALS INC [SUPN] 3. Date of Earliest Transaction (Month/Day/Year) 04/03/2017 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | X X | all app Direct Office below | plicable) ctor er (give title w) President, | | Person(s) to Issuer 10% Owner Other (specify below) , CEO Filing (Check Applicable | |
|---|--|------------|---------------|--|------|---|---------------------|-------------------|--|---|---------------|---|-----------|--|----------|--------------------------------------|---|-----------------------------------|--|--|
| (Street) ROCKVI (City) | | | 20850 Zip) | | | | | | | | | | | | X | ' | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | Exec if an | Deemed cution Date, | | Transaction Code (Instr. a | | | 4. Securities Acquired Disposed Of (D) (Instr. | | | (A) or 5 | | 5. Amount of Securities Beneficially Owned Following | | nership : Direct ect (I) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | Code | v | Amount | | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | | (Instr. 4) | | |
| Common | Stock | 04/03/2 | 2017 | | | | J | | 4,250 |) | A | (1) | | 449,909(1) | | | D | | | |
| Common | 04/03/2 | 04/03/2017 | | | | J | | 4,250 |) | D | (1) | | 1,089,750 | | I | | By the KBT Trust | | | |
| Common | Stock | | | | | | | | | | 2,250(2) | | ,250(2) | | I | By son | | | | |
| 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) | tive Conversion Date ty or Exercise (Month/Day/Year) if any | | | | | | ion of | | 6. Date Exercisable a Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | | Secu | ivative urity etr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ov Fo Di or (I) 4) | wnership orm: rect (D) Indirect (Instr. | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | Code V (A) (D) | | Date Exercisab | eate Expirat exercisable Date | | Title | or Number of | | | | | | | | |

Explanation of Responses:

- 1. The Reporting Person is filing this Form 4 to reflect the fact that 4,250 shares were transferred from the KBT Trust to the Reporting Person on April 3, 2017 without consideration and are now owned directly.
- 2. The Reporting Person disclaims beneficial ownership of the shares held by his son, who shares the Reporting Person's household, and this report should not be deemed an admission that the Reporting Person is the beneficial owner of his son's shares for purposes of Section 16 or for any other purpose.

/s/ Gregory S. Patrick, as attorney-in-fact 04/04/2017

** Signature of Reporting Person Dat

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.