SEC Form 4													
FORM 4	ED STATI	TES SECURITIES AND EXCHANGE COMM Washington, D.C. 20549 NT OF CHANGES IN BENEFICIAL OWNERS d 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			
Check this box if no longer subject Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).									Es Es				
1. Name and Address of Reporting Person [*] <u>PATRICK GREGORY S</u>			2. Issuer Name and Ticker or Trading Symbol <u>SUPERNUS PHARMACEUTICALS, INC.</u> [SUPN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below)				
(Last)(First)C/O SUPERNUS PHARMAC9715 KEY WEST AVENUE	DIC	3. Date of Earliest Transaction (Month/Day/Year) 10/15/2020						Sr. VP, CFO					
(Street) ROCKVILLE MD (City) (State)	· ·	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
	Table I - N	lon-Derivat	ive Securities A	cquired	d, D	isposed o	f, or B	enefic	cially (Dwned			
1. Title of Security (Instr. 3) Date (Month/Day/*			2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (In 8) Code		Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Followin Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		

Common Stock 10/15/2020 M⁽¹⁾ 15,000 A \$12.98 59,463 Common Stock 10/15/2020 s⁽¹⁾ 15,000 D \$20.0338⁽²⁾ 44,463 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)	Transaction Code (Instr. Deriv 8) Secu (A) Q Disp of (D		umber vative urities uired or oosed D) (Instr. 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				
Employee Stock Option (Right to Buy)	\$12.98	10/15/2020		M ⁽¹⁾			15,000	(3)	03/01/2026	Common Stock	15,000	\$0	20,000	D	

Explanation of Responses:

1. Transaction made pursuant to a 10b5-1 trading plan adopted September 15, 2020.

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$20,0000 to \$20,5000, inclusive. The reporting person undertakes to provide to Supernus Pharmaceuticals, Inc. ("Supernus"), any security holder of Supernus, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote (2) to this Form 4.

3. The option vests in four equal annual installments beginning on March 1, 2017.

/s/ Gregory S. Patrick

** Signature of Reporting Person

<u>10/15/2020</u> Date D

D

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.