FORM 4

UNI

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

IED STATES	SECURITIES	S AND EXCHANGE	COMMISSIO

OMB APPROVAL							
OMB Number:	3235-0287						
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0.5

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	Check this box if no longer subject to
	Section 16. Form 4 or Form 5
	obligations may continue. See
	Instruction 1(b)

securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 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

1. Name and Address of Reporting Person* Mottola Frank			SU	2. Issuer Name and Ticker or Trading Symbol SUPERNUS PHARMACEUTICALS, INC. SUPN							(Che	elationship o eck all applic Directo	able)	g Perso	on(s) to Issu 10% Ow Other (s	ner		
(Last) (First) (Middle) C/O SUPERNUS PHARMACEUTICALS, INC., 9715 KEY WEST AVENUE		11/	3. Date of Earliest Transaction (Month/Day/Year) 11/07/2024 4. If Amendment, Date of Original Filed (Month/Day/Year)							Officer (give title below) SVP, Quality, GMP, Ops, IT Individual or Joint/Group Filing (Check Applicable								
(Street) ROCKV (City)			20850 (Zip)		4. 11	i Ame	endment, Date	or Origina	ai Filed	a (Month/Day	y/ rea	ear)	Line) / Form fi	led by One led by Mor	Repor	ting Persor	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			Execution Date		xecution Date, any	3. Transaction Code (Instr. 8) 4. Securities Acqui Disposed Of (D) (In					Securitie Benefici Owned F	5. Amount of Securities Beneficially Owned Following		Direct Indirect In	7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount		(A) or (D)	Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 11/07/2			/2024			м 15,00		15,000		A	\$9.13	23,2	23,200(1)		D			
Common Stock 11/07/2			2024			S		15,000(2)		D	\$36.98	8,200			D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
		ransad ode (l		5. Number of 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 Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		es I Security	8. Price of Derivative Security (Instr. 5) Securities Beneficia Owned Following Reported Transacti (Instr. 4)		e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

\$9.13

- 1. Includes an aggregate of 421 shares acquired by the Reporting Person through the Issuer's Employee Stock Purchase Plan.
- 2. The Reporting Person exercised the options indicated herein and sold the underlying shares prior to the expiration of such options on March 3, 2025.

Code ν

M

(A) (D)

15,000

3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$36.73 to \$37.27. 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 to this Form 4

Date

Exercisable

03/03/2016⁽⁴⁾

4. The option vested in four equal installments beginning on March 3, 2016.

11/07/2024

Remarks:

Employee Stock Option (Right to

> /s/ Timothy C. Dec, as attorneyin-fact

or Number

Shares

15,000

\$0

Expiration Date

03/03/2025

Title

Commor

11/08/2024

0

D

** 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.