#### FORM 4

#### UNITE

Washington, D.C. 20549

	ED STATES SECURITIES AND EXCHANGE COMMISS	101
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# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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 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

	don 10.																		
Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol SUPERNUS PHARMACEUTICALS, INC.								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Khattar Jack A.						SUPN ]							<u></u> L   🔽	Director			10% Ov	ner	
(Last)	(F	First)	(Middle)		-Ľ	SOLIN ]							V	Officer (below)	give title		Other (s below)	pecify	
` ′	,	,	,	_		3. Date of Earliest Transaction (Month/Day/Year)									Preside	ent, C	EO		
C/O SUPERNUS PHARMACEUTICALS INC.					1	11/08/2024													
9715 KEY WEST AVENUE						4. If Amandment, Date of Original Filed (Month/Dec.2/)							6 Inc	C Individual or Idint/Croup Filing (Cheek Assissation					
(Street)						If Amendment, Date of Original Filed (Month/Day/Year)							Line)	Individual or Joint/Group Filing (Check Applicable Line)					
ROCKV	ILLE M	1D	20850											Form filed by One Reporting Person					
														Form filed by More than One Reporting Person					
(City)	(S	State)	(Zip)											i erson					
		Та	able I - N	on-De	rivati	ve S	ecui	ities Ac	quired	l, Di	sposed o	f, or Ber	neficially	Owned					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					ear) l	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Disposed O		Beneficially Owned Foll		Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
										v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 11/08/					08/202	4			М		125,000	Α	\$9.13	1,051	1,172		D		
Common Stock 1				11/0	11/08/2024				S		125,000	1) D	\$36.29(2	926,172			D		
Common Stock													1,022	2,450		I :	By the KBT Trust		
			Table II								oosed of, convertib			wned			<u> </u>		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d Date,	4. Transa	ransaction ode (Instr.		5. Number of Derivative			sable and	7. Title and of Securiti Underlying Derivative (Instr. 3 and	d Amount les g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	de V	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares	t (Inst					
Employee Stock Option (Right to	\$9.13	11/08/2024			M			125,000	03/03/20	16 <sup>(3)</sup>	03/03/2025	Common Stock	125,000	\$0	0		D		

# **Explanation of Responses:**

- 1. The Reporting Person exercised the options indicated herein and sold the underlying shares prior to the expiration of such options on March 3, 2025.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$35.87 to \$36.66. 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.
- 3. The option vested in four equal installments beginning on March 3, 2016

### Remarks:

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

11/12/2024

\*\* 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.