SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	Check this box if no longer subject to
1	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

OMB APPROVAL												
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	0.0

1. Name and Address of Reporting Person [*] Gardiner Nathaniel S.			2. Issuer Name and Ticker or Trading Symbol <u>ENANTA PHARMACEUTICALS INC</u> [ENTA]		tionship of Reporting Perso all applicable) Director Officer (give title below)	on(s) to Issuer 10% Owner Other (specify below)
(Last) (First) (Mii C/O ENANTA PHARMACEUTICALS 500 ARSENAL STREET		(Middle) CALS, INC.	3. Date of Earliest Transaction (Month/Day/Year) 12/16/2019		Sr. VP & General	,
(Street) WATERTOWN (City)	MA (State)	02472 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Filing Form filed by One Repor Form filed by More than Person	rting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

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1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)		
Common Stock	12/16/2019		М		5,250 ⁽¹⁾	A	(2)	24,989	D			
Common Stock	12/16/2019		F		2,331 ⁽³⁾	D	\$63.88	22,658	D			
Common Stock								16,645	I	By grantor retained annuity trust ⁽⁴⁾		

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)	4. Transa Code (8)		n of		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)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Restricted Stock Units	(2)	12/16/2019		М			5,250	(5)	(5)	Common Stock	5,250	\$0	5,250	D	

Explanation of Responses:

1. Represents shares of ENTA common stock subject to a restricted stock unit award granted on November 18, 2016 that vested on November 18, 2019. The settlement and issuance of the shares was subject to continued employment and occurred on December 16, 2019.

2. Restricted stock units convert into ENTA common stock on a one-for-one basis.

3. Represents the number of shares of ENTA common stock forfeited by the reporting person to cover withholding taxes due as a result of settlement of the restricted stock unit award.

4. On April 10, 2019, the reporting person contributed 16,645 shares of common stock to a grantor retained annuity trust for the benefit of himself and his two adult children.

5. On November 18, 2016, the reporting person was granted 10,500 restricted stock units. 5,250 restricted stock units vested on November 18, 2019 and the remainder will vest on November 18, 2020, subject to the reporting person's continued employment.

Remarks:



** Signature of Reporting Person

01/06/2020

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.