FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL							
	OMB Number:	3235-028						
- 1		learned and						

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).

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* MELLETT PAUL J (Last) (First) (Middle) C/O ENANTA PHARMACEUTICALS, IN 500 ARSENAL STREET (Street) WATERTOWN MA 02472	2. Issuer Name and Ticker or Trading Symbol ENANTA PHARMACEUTICALS INC ENTA 3. Date of Earliest Transaction (Month/Day/Year) 11/28/2014 4. If Amendment, Date of Original Filed (Month/Day/Year)					.[5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Treasurer and CFO 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(City) (State) (Zip)										Persoi	n filed by More than One Reporting on		orung
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1. Title of Security (Instr. 3)	2A. Deemed Execution Date, if any (Month/Day/Year)		Cod	Transaction Disposed Of Code (Instr.		Acquired (A) or f (D) (Instr. 3, 4 and 5)			Beneficially Owned Followi		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
				Cod	le V	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock	11/28/2014	.4		S ⁽¹⁾	.)	4,308	D	\$46.90	95 ⁽²⁾	12	8,089	D	
Common Stock	11/28/2014	.4		S ⁽¹⁾	.)	850	D	\$48.12	48.1206 ⁽³⁾		7,239	D	
Common Stock	11/28/2014	14		S ⁽¹⁾	.)	842	D	\$48.56	85 ⁽⁴⁾	12	6,397	D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)													
Security or Exercise (Month/Day/Year) if any	tion Date, Tra	ansaction ode (Instr.	5. Numbor of Derivativ Securitie Acquired (A) or Disposed of (D) (Instr. 3, and 5)	es (Me	Date Exer piration E onth/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			vative cority S		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Co	ode V	(A) (D	Da) Ex	ate ercisable	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person in May 2014 to provide liquidity for tax payments due on account of prior option
- 2. The price reported in Column 4 is a weighted-average price. These shares were sold in multiple transactions at prices ranging from \$46.6000 to \$47.4800, inclusive.
- 3. The price reported in Column 4 is a weighted-average price. These shares were sold in multiple transactions at prices ranging from \$47.7100 to \$48.4400, inclusive.
- 4. The price reported in Column 4 is a weighted-average price. These shares were sold in multiple transactions at prices ranging from \$48.4450 to \$48.7200, inclusive.

The reporting person undertakes to provide to Enanta Pharmaceuticals, Inc., any security holder of Enanta Pharmaceuticals, Inc., 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 ranges set forth in footnotes 2, 3 and 4 above.

> /s/ Paul J. Mellett 12/02/2014

** 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.