FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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

Name and Address of Reporting Person*     Or Yat Sun					EN	2. Issuer Name and Ticker or Trading Symbol ENANTA PHARMACEUTICALS INC [ ENTA]								(Check	all app	olicable)	g Person(s) to I 10% ( Other	
						3. Date of Earliest Transaction (Month/Day/Year) 07/01/2014								X Officer (give title below) Officer (specify below)  Chief Scientific Officer				
SOU ARSENAL STREET  (Street)  WATERTOWN MA 02472  (City) (State) (Zip)				4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tabl	e I - 1	Non-Deriv	/ative	Sec	uritie	s Ac	quir	ed, D	isposed o	f, or E	Benefic	ially	Owne	ed		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				Execution Date,		3. 4. Securities Ac Transaction Code (Instr. 8)				d 5) Securi Benefi		ficially d Following	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		Trans	action(s) 3 and 4)		(instr. 4)	
Common Stock 07/01/201				014	14			<b>S</b> <sup>(1)</sup>		4,700	D	\$42.19	<del>9</del> 68 <sup>(2)</sup>		74,378	D		
Common Stock 07/01/201				014	14			S <sup>(1)</sup>		300	D	\$42.97	<sup>7</sup> 67 <sup>(3)</sup>	1	74,078	D		
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)	vative rity or Exercise Price of Derivative Security    Conversion or Exercise (Month/Day/Year)   Execution Date, if any (Month/Day/Year)   Execution Date,		4. Transa Code ( 8)	(Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Date Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of		nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

## **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 February 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 \$41.8300 to \$42.6400, inclusive.
- 3. The price reported in Column 4 is a weighted-average price. These shares were sold in multiple transactions at prices ranging from \$42.8400 to \$43.2000, inclusive.

## Remarks:

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 and 3 above.

<u>/s/ Yat Sun Or</u> <u>07/02/2014</u>

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.