

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

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

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

1. Name and Address of Reporting Person* <u>Or Yat Sun</u> (Last) (First) (Middle) C/O ENANTA PHARMACEUTICALS, INC. 500 ARSENAL STREET (Street) WATERTOWN MA 02472 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>ENANTA PHARMACEUTICALS INC [ENTA]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer (give title below) <input checked="" type="checkbox"/> Other (specify below) <input type="checkbox"/> Sr. VP & CSO
	3. Date of Earliest Transaction (Month/Day/Year) 11/20/2020	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Common Stock	11/20/2020		A ⁽¹⁾		7,600	A	\$0.0	313,515	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		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 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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Stock Option (right to buy)	\$43.57	11/20/2020		A		30,800		(2)	11/20/2030	Common Stock	30,800	\$0.0	30,800	D	

Explanation of Responses:

- Represents a grant of restricted stock units ("RSUs") under the Enanta Pharmaceuticals, Inc. ("Enanta") 2019 Equity Incentive Plan. Each RSU represents the contingent right to receive, upon vesting of the unit, one share of Enanta common stock. The RSUs vest in equal annual installments over four years from the date of grant (November 20, 2020). The restricted stock unit shares that vest will be issued on the first December 1 after the applicable vesting date, subject to withholding of a portion of the vested shares to satisfy tax withholding requirements.
- Such option will become exercisable (subject to the optionholder's continued employment) quarterly in substantially equal installments (any fractional shares to be cumulated and to become exercisable at the end of the earliest succeeding quarterly period in which a whole share equivalent is accumulated) over four years from the date of grant (November 20, 2020).

Remarks:

/s/ Nathaniel S. Gardiner as attorney-in-fact

11/20/2020

** 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.