FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response: 0.								

	tion 1(b).	aride. dec		Filed	l pursua or Se	ant to S ection 3	Section 30(h) c	16(a) of the li	of the S nvestme	Securit ent Co	ies Exchang mpany Act o	e Act of f 1940	1934		nours	s per r	esponse:	0.5
1. Name and Address of Reporting Person* <u>Kieffer Tara Lynn</u>					2. Issuer Name and Ticker or Trading Symbol ENANTA PHARMACEUTICALS INC [ ENTA ]								5. Relationship of Reporting Person(s) to Issue (Check all applicable)  Director 10% Owner (Special Control of Special Control				wner	
(Last) (First) (Middle) C/O ENANTA PHARMACEUTICALS, INC.				3. Date of Earliest Transaction (Month/Day/Year) 12/05/2023									beit	,	rod.	below) od. Strat. & Dev		
500 ARSENAL STREET				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						
(Street) WATERTOWN MA 02472											For	Form filed by More than One Reporting Person						
(City)	(S	tate) (2	Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant								contract ins	truction or writ	tten nl:	an that is inte	ended to	
		Table	. I. No	n Doriva		satisfy t	he affir	mative	defense	conditi	ons of Rule 10	)b5-1(c).	See Instr	uction 10.			ari triat io irito	indea to
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			tion	Deemed cution Date, ly nth/Day/Year)		3. 4. Secu Transaction Dispos Code (Instr. 5)		4. Securities Disposed O	rities Acquired (A ed Of (D) (Instr. 3,		5. An Secu Bene	nount of rities ficially ed Following	For (D)	Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock 12/05/				2022			Code	v	Amount 2,125 <sup>(1)</sup>	(A) or (D)	Price	Trans (Inst	saction(s) : 3 and 4)	ion(s) ind 4)		(111041. 4)		
Common	Stock	Та	ble II -	Derivati	ive Se				ired, I		osed of, convertib	or Ben	eficia	Ily Own			D	
Derivative Conversion D		3. Transaction Date (Month/Day/Year)	Execut if any	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 (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
		1				I		1	l		1		r	I	1			1

## **Explanation of Responses:**

- 1. Represents shares sold by the reporting person to cover withholding taxes due as a result of settlement of a portion of the restricted stock unit award granted on November 23, 2022, as required pursuant to the terms of the award. The sale was to satisfy tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary transaction by the reporting person.
- 2. The price reported in Column 4 is a weighted-average price. These shares were sold in multiple transactions at prices ranging from \$9.48 to \$9.63, 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 set forth in this footnote of this Form 4.

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

12/06/2023

\*\* 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.