FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549
vvasiliigton,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL						
OMB Number:	3235-0287						
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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

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Name and Address of Reporting Person* Gardiner Nathaniel S.					<u>E1</u>												5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify					
	•	RMACEUTICA	(Middle) ALS, INC.		11/	3. Date of Earliest Transaction (Month/Day/Year) 11/19/2021												VP & Ge	below) General Counsel			
(Street) WATER	TOWN M	IA	02472		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indi Line) X	,						
(City)	(S	itate)	(Zip)																			
		Tab	ole I - Nor	n-Deriv	ativ	e Se	curities	s Ac	qui	ired, C	Disp	osed o	f, or	Ben	efic	ially	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)						and Securitie Benefici		s ally ollowing	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										Code	v	Amount	t (A) or Pr		Pric	e	Transaction(s) (Instr. 3 and 4)				(111511. 4)	
Common Stock				11/19	11/19/2021					A ⁽¹⁾		6,800)	A	!	\$ 0	59,	,783		D		
Common Stock														5,910(2)			I	By grantor retained annuity trust ⁽²⁾				
		•	Table II -				urities . s, warr										wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date, T	Fransaction Code (Instr.		n of		Exp	Date Exe piration I onth/Day	Date	of Securities		s Securi	5		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title		Amou or Numb of Share	er						
Stock Option (right to buy)	\$75.33	11/19/2021			A		28,400			(3)	1:	1/19/2031	Com Sto	mon ock	28,4	00	\$0	28,40	0	D		

Explanation of Responses:

- 1. 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 19, 2021). 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.
- 2. Between April and August 2021, a total of 10,735 shares of common stock were distributed to the reporting person from grantor retained annuity trusts created by the reporting person for the benefit of himself and his two adult children (the "GRATs"). The remaining shares are held by one of the GRATs.
- 3. 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 19, 2021).

/s/ Nathaniel S. Gardiner

** Signature of Reporting Person Date

11/23/2021

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.