| SEC For  | rm 4 |     |             |   |        |   |   |  |                      |        |   |             |         |   |  |              |  |  |       |  |
|--|------|-----|-------------|---|--------|---|---|--|----------------------|--------|---|-------------|---------|---|--|--------------|--|--|-------|--|
| FORM 4 UNITED STAT   |      |     |             | TES                                     | s si   |   |   | <b>IS ANI</b><br>ngton, D.C.                                   |                      |        | NGE   | CC          | OMMI    | SSION   |  | OMB          | APPRO  | VAL  |       |  |
| Section 16. Form 4 or Form 5<br>obligations may continue. See  |      |     |             |   | d purs | T OF CHANGES IN BENEFICIAL OWNE<br>pursuant to Section 16(a) of the Securities Exchange Act of 1934<br>or Section 30(h) of the Investment Company Act of 1940 |   |  |                      |        |   |             |         |   | Estin  |              |  | OMB Number: 3235-0287   Estimated average burden   nours per response: 0.5 |       |  |
| 1. Name and Address of Reporting Person*<br><u>FIELDS HEIDI</u>  |      |     |             |   |        | 2. Issuer Name <b>and</b> Ticker or Trading Symbol<br><u>Phathom Pharmaceuticals, Inc.</u> [ PHAT ]   |   |  |                      |        |   |             |         |   | Relationship o<br>leck all applio  | cable)<br>or | g Pers   | vner   |       |  |
| (Last) (First) (Middle)<br>C/O PHATHOM PHARMACEUTICALS, INC.<br>100 CAMPUS DRIVE, SUITE 102  |      |     |             |   |        | 3. Date of Earliest Transaction (Month/Day/Year)<br>05/21/2020  |   |  |                      |        |   |             |         |   | Officer (give title Other (specify below) below)   |              |  |  | респу |  |
| (Street)<br>FLORHAM NJ 07932<br>PARK   |      |     | 07932       |   | 4.1    | lf Ame  | endment, I  | Date o   | of Original          |        |   |             |         | Line  |  |              |  | p Filing (Check Applicabl<br>e Reporting Person<br>re than One Reporting   |       |  |
| (City) (State) (Zip)   |      |     |             |   |        |   |   |  |                      |        |   |             |         |   |  |              |  |  |       |  |
|  |      | Tab | ole I - Nor | n-Deriv                                 | ative  | e Se  | curities  | s Ac   | quired,              | Dis    | posed o   | f, or I     | Bene    | eficial   | ly Owned   |              |  |  |       |  |
| 1. Title of Security (Instr. 3) 2. Transa<br>Date<br>(Month/E  |      |     |             |   | ear)   | Execution if any  | A. Deemed<br>xecution Date,<br>any<br>Month/Day/Year) |  | Code (Instr.         |        | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4<br>5)                        |             |         | Beneficia<br>Owned F                                | s Forn<br>Illy (D) o<br>ollowing (I) (Ir   |              | : Direct<br>Indirect<br>str. 4)  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)          |       |  |
|  |      |     |             |   |        |   |   | Code   | v                    | Amount | (A<br>(D  | A) or<br>D) | Price   | Reported<br>Transaction(s)<br>(Instr. 3 and 4)      |  |              |  |  |       |  |
|  |      | -   | Table II -  |   |        |   |   |  | uired, D<br>, option |        |   |             |         |   | Owned  |              |  |  |       |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security 3. Transaction<br>Date<br>(Month/Day/Year) 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |      |     | Date, T     | 1.<br>Fransaction<br>Code (Instr.<br>3) |        | of  |   | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                      |        | 7. Title and Amo<br>of Securities<br>Underlying<br>Derivative Secur<br>(Instr. 3 and 4) |             | ecurity | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) |              | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)         |       |  |
|  |      |     |             |   |        |   |   |  |                      |        |   |             | c       | lmount<br>or<br>lumber                              |  |              |  |  |       |  |

Explanation of Responses:

\$36.85

1. The option was granted pursuant to the Registrant's Non-Employee Director Compensation Program. The option shall vest and/or become exercisable on the first to occur of (A) the first anniversary of the date of grant or (B) the next occurring annual meeting of the Registrant's stockholders, subject to Heidi Kunz continuing in service on the Board through such vesting date.

Date Exercisable

(1)

(D)

(A)

10,000

Expiration Date

05/20/2030

Title

Common Stock

## **Remarks:**

Stock Options

| /s/ Larry Miller, Attorney- | in- |
|-----------------------------|-----|
| Fact for Heidi Kunz         |     |

of Shares

10,000

\$0.00

05/22/2020

10,000

D

\*\* 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).

05/21/2020

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

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.