| SEC Form | m 5 | | | | | | | | | | | | | | | |
|--|--|-----------------|---|--|---|---|--|---------|---|---|---|-----------------------------|---|--|----------------------------------|--|
| F | FORM | 5 U | NITED STA | TES SECI | | | | AN | GE CO | MM | ISSIO | N | | | | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). | | | | Washington, D.C. 20549 . STATEMENT OF CHANGES IN BENEFI OWNERSHIP | | | | | | | AL | | OMB APPROVAL OMB Number: 3235-0362 Estimated average burden | | | |
| Form 3 | Holdings Rep | OWNERGHIP | | | | | | | | ho | urs per r | esponse: | 1.0 | | | |
| Form 4 | Transactions | Reported. | File | | | | e Securities Exch tment Company A | | | | | | | | | |
| 1. Name and Address of Reporting Person [*] Socks David A | | | | 2. Issuer Name and Ticker or Trading Symbol <u>Phathom Pharmaceuticals, Inc.</u> [PHAT] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify below) below) | | | | | |
| (Last)(First)(Middle)C/O PHATHOM PHARMACEUTICALS, IN100 CAMPUS DRIVE, SUITE 102 | | | | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/01/2020 | | | | | | | | | | | | |
| (Street) FLORHAM PAK NJ | | |)7932 | 4. If Amendm | 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 | | | | | | |
| (City) (State) | | | Zip) | | | | | | | | | | | | | |
| | | Table | e I - Non-Deriv | ative Securi | ties Acq | uire | ed, Disposed | d of, | or Benef | icia | lly Own | ed | | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) Of (D) (Instr. 3, 4 and 5) | | | | 5. Amount of Securities Beneficially | | 6. Owne Form: | rship Ir | Nature of direct eneficial | |
| | | (Month/Day/Year | | () 8) | | Amount | (A) c (D) | r Price | | - Owned at end of Issuer's Fiscal Year (Instr. 3 and 4) | | (D) or Indire (Instr. | ct (I) (I | wnership nstr. 4) | | |
| Common Stock | | 12/01/2020 | | G | | 27,000 | D | \$0.0 | \$0.00 | | 1,505,945 | | I S F | David A. ocks 2013 Levocable Yrust | | |
| | | Та | ble II - Deriva (e.g., p | | | | d, Disposed of tions, conve | | | | y Owne | d | | | | |
| Derivative Security (Instr. 3) | Derivative Conversion Date Security or Exercise (Month/Day/Year | | 3A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 | Expiration (Month/Day urities urities posed D) tr. 3, 4 | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) 9. Numt derivativ Securiti Benefic Owned Followin Reporte Transac (Instr. 4) | | ve les ially ng ed ction(s) | 10. Ownersh Form: Direct (D) or Indirec (I) (Instr. 4 | t (Instr. 4) | |

Explanation of Responses:

Remarks:

/s/ Larry Miller, Attorney-in-02/12/2021 Fact for David A. Socks

** Signature of Reporting Person Date

Amount or Number of Shares

Title

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.

(A) (D) Date Exercisable

Expiration Date