FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-0104 OMB Number: Estimated average burden hours per response:

0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Medicxi Ventures Management (Jersey) Ltd		2. Date of E Requiring S (Month/Day 01/24/202	Statement /Year)	3. Issuer Name and Ticker or Trading Symbol Phathom Pharmaceuticals, Inc. [PHAT]								
(Last) (First) (Middle) C/O INTERTRUST FUND			-		4. Relationship of Reporting Issuer (Check all applicable) Director			File	d (Month/Day/	<i>,</i>		
SERVICES (JERSEY) LIMITED 44 ESPLANADE			-		Officer (give title below)	Other (below)	specify		eck Applicable	int/Group Filing e Line) by One Reporting		
(Street) ST. HELIER) J	E4 9WG						У	Como file d	by More than One Person		
(City) (St	ate) (2	Zip)										
	Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)	3. Owner Form: D (D) or Ir (I) (Insti	irect direct	ct Ownership (Instr. 5)				
Common Stock					3,673,602]		By Medicxi Growth I LP ⁽¹⁾		wth I LP ⁽¹⁾		
Common Stock					87,267]		By Medicxi Growth Co-Invest LP ⁽²⁾		wth Co-Invest I		
Common Stock					3,641,728	1		By Medicxi IV LP ⁽³⁾		L P (3)		
Common Stock					61,975	1	.	By Medicxi Co-Invest IV LP ⁽⁴⁾		Invest IV LP ⁽⁴⁾		
Common Stock					- 9				viculexi Co-			
Common Stock		(e.g			e Securities Beneficia ants, options, converti		ed		viculexi Co-			
1. Title of Derivativ	ve Security (I			s, warra	e Securities Beneficia ants, options, converti	ble sec	ed urities) 4. Convers	sion	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr.		
	ve Security (I		2. Date Exerc	s, warra	e Securities Beneficia ants, options, converti	ble sec	ed urities) 4. Convers	sion cise	5. Ownership	Indirect Beneficial		
	ess of Reportin	ng Person*	., puts, call 2. Date Exerc Expiration Do (Month/Day/ Date Exercisable	s, warra	e Securities Beneficia ants, options, converti	ecurities ecurity Amount or Number of	4. Conversor Exercity Price of Derivati	sion cise	5. Ownership Form: Direct (D) or Indirect	Indirect Beneficial Ownership (Instr.		
Title of Derivation Name and Address Medicxi Ven	ess of Reportir tures Mar (First) UST FUND	ng Person* nagement (Mic	2. Date Exercisable Date Exercisable (Jersey)	Expiration Date	e Securities Beneficia ants, options, converti	ecurities ecurity Amount or Number of	4. Conversor Exercity Price of Derivati	sion cise	5. Ownership Form: Direct (D) or Indirect	Indirect Beneficial Ownership (Instr.		
1. Name and Addrest Medicxi Ven Ltd (Last) C/O INTERTRI	ess of Reportir tures Mar (First) UST FUND	ng Person* nagement (Mic	2. Date Exercisable Date Exercisable (Jersey)	Expiration Date	e Securities Beneficia ants, options, converti	ecurities ecurity Amount or Number of	4. Conversor Exercity Price of Derivati	sion cise	5. Ownership Form: Direct (D) or Indirect	Indirect Beneficial Ownership (Instr.		
1. Name and Addre Medicxi Ven Ltd (Last) C/O INTERTRULIMITED 44 E (Street)	ess of Reportir itures Mar (First) UST FUND SPLANADI	ng Person* nagement (Mic	2. Date Exerc Expiration Di (Month/Day/\text{V}) Date Exercisable (Jersey)	Expiration Date	e Securities Beneficia ants, options, converti	ecurities ecurity Amount or Number of	4. Conversor Exercity Price of Derivati	sion cise	5. Ownership Form: Direct (D) or Indirect	Indirect Beneficial Ownership (Instr.		
1. Name and Addre Medicxi Ven Ltd (Last) C/O INTERTRULIMITED 44 E (Street) ST. HELIER	ess of Reporting tures Mar (First) UST FUND SPLANADI Y9 (State)	nstr. 4) ng Person* nagement (Mid SERVICE E	2. Date Exerc Expiration Di (Month/Day/\text{V}) Date Exercisable (Jersey)	Expiration Date	e Securities Beneficia ants, options, converti	ecurities ecurity Amount or Number of	4. Conversor Exercity Price of Derivati	sion cise	5. Ownership Form: Direct (D) or Indirect	Indirect Beneficial Ownership (Instr.		

	ESPLANADI	
(Street) ST. HELIER	Y9	JE4 9WG
(City)	(State)	(Zip)
1. Name and Addr Medicxi Gro		g Person [*]
(Last) C/O INTERTR	(First) UST FUND	(Middle) SERVICES (JERSEY)
LIMITED 44 E	ESPLANADI	<u> </u>
(Street) ST. HELIER	Y9	JE4 9WG
(City)	(State)	(Zip)
1. Name and Addr <u>Medicxi Gro</u>		
(Last)	(First)	(Middle)
C/O INTERTR LIMITED 44 E		SERVICES (JERSEY)
(Street) ST. HELIER	Y9	JE4 9WG
(City)	(State)	(Zip)
1. Name and Addr Medicxi IV		g Person [*]
(Last) C/O INTERTR	(First) UST FUND	(Middle) SERVICES (JERSEY)
LIMITED 44 E	ESPLANADI	3
(Street) ST. HELIER	Y9	JE4 9WG
(City)	(State)	(Zip)
1. Name and Addr Medicxi IV		g Person [*]
(Last) C/O INTERTR	(First) UST FUND	(Middle) SERVICES (JERSEY)
LIMITED 44 E		
(Street) ST. HELIER	Y9	JE4 9WG
(City)	(State)	(Zip)
1. Name and Addr Medicxi Co-		
(Last) C/O INTERTR	(First) UST FUND	(Middle) SERVICES (JERSEY)

(Street) ST. HELIER	Y9	JE4 9WG
(City)	(State)	(Zip)

Explanation of Responses:

- 1. Shares held by Medicxi Growth I LP ("Growth I"). Medicxi Growth I GP Limited ("Growth I GP") is the sole general partner of Growth I, and Medicxi Ventures Management (Jersey) Limited ("Medicxi Manager") is the sole manager of Growth I. The Reporting Persons disclaim Section 16 beneficial ownership of the securities held by Growth I, except to the extent of their respective pecuniary interest therein, if any, and this report shall not be deemed to be an admission that they are the beneficial owners of such shares for Section 16 or any other purpose.
- 2. Shares held by Medicxi Growth Co-Invest I LP ("Growth Co-Invest I"). Growth I GP is the sole general partner of Growth Co-Invest I, and Medicxi Manager is the sole manager of Growth Co-Invest I. The Reporting Persons disclaim Section 16 beneficial ownership of the securities held by Growth Co-Invest I, except to the extent of their respective pecuniary interest therein, if any, and this report shall not be deemed to be an admission that they are the beneficial owners of such shares for Section 16 or any other purpose.
- 3. Shares held Medicxi IV LP ("Medicxi IV"). Medicxi IV GP Limited ("Medicxi IV GP") is the sole general partner of Medicxi IV, and Medicxi Manager is the sole manager of Medicxi IV. The Reporting Persons disclaim Section 16 beneficial ownership of the securities held by Medicxi IV, except to the extent of their respective pecuniary interest therein, if any, and this report shall not be deemed to be an admission that they are the beneficial owners of such shares for Section 16 or any other purpose.
- 4. Shares held by Medicxi Co-Invest IV LP ("Co-Invest IV"). Medicxi IV GP is the sole general partner of Co-Invest IV, and Medicxi Manager is the sole manager of Co-Invest IV. The Reporting Persons disclaim Section 16 beneficial ownership of the securities held by Co-Invest IV, except to the extent of their respective pecuniary interest therein, if any, and this report shall not be deemed to be an admission that they are the beneficial owners of such shares for Section 16 or any other purpose.

MEDICXI VENTURES MANAGEMENT (JERSEY) LIMITED, By: 01/26/2024 /s/ Giles Johnstone-Scott, Director **MEDICXI GROWTH I** LP, By: Medicxi Ventures 01/26/2024 Management (Jersey) Limited, By: /s/ Giles Johnstone-Scott, Director MEDICXI GROWTH CO-INVEST I LP, By: Medicxi Ventures 01/26/2024 Management (Jersey) Limited, By: /s/ Giles Johnstone-Scott, Director MEDICXI GROWTH I GP LIMITED, By: /s/ 01/26/2024 Nigel Crocker, Alternate Director MEDICXI IV LP, By: Medicxi Ventures 01/26/2024 Management (Jersey) Limited, By: /s/ Giles Johnstone-Scott, Director MEDICXI CO-INVEST IV LP, By: Medicxi Ventures Management 01/26/2024 (Jersey) Limited, By: /s/ Giles Johnstone-Scott, <u>Director</u> MEDICXI IV GP LIMITED, By: /s/ Nigel 01/26/2024 Crocker, Alternate **Director** ** Signature of Reporting Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).