FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washingt

| Washington, D.C. 20549 | OMB APPROVAL | | | |
|--|--------------------------|-----------|--|--|
| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: | 3235-0287 | | |
| | Estimated average burden | | | |

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0.5

| 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

| 1. Name and Address of Reporting Person* Parikh Asit | | | | | 2. Issuer Name and Ticker or Trading Symbol Phathom Pharmaceuticals, Inc. [PHAT] | | | | | | | | | | k all app Direc | onship of Reportir all applicable) Director | | 10% Ov | wner |
|---|--|---------|----------|---|--|--|--|--|---|------------|---|------|----------|----------------------------|--|---|---|--|------|
| (Last) (First) (Middle) C/O PHATHOM PHARMACEUTICALS, INC. 100 CAMPUS DRIVE, SUITE 102 | | | | NC. | 3. Date of Earliest Transaction (Month/Day/Year) 05/12/2022 | | | | | | | | | | below | | | Other (s below) | . , |
| (Street) FLORHA | AM _{NJ} | 0 | 7932 | | 4. If <i>F</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi Line) X | ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (St | ate) (Z | Zip) | | | | | | | | | | | | | | | | |
| | | Table | I - Nor | n-Deriva | tive S | Secui | rities | Acq | uired, | Dis | posed of | or B | enefi | cially | / Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Exec if an | Deemed ecution Date, ny onth/Day/Year) | | 3. Transaction Code (Instr. 8) 4. Securities Ad Disposed Of (Disposed | | | | | | | ies cially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | Code | v | Amount | (A) or (D) | | ce | | ed ction(s) 3 and 4) | | | (Instr. 4) | | |
| Common Stock 05/12/ | | | | | 2022 | | | P | | 12,500 | A : | | \$8 | 12,500 | | | D | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) 3A. Deemed Execution Date, if any (Month/Day/Year) | | on Date, | 4. Transaction Code (Instr. 8) | | of Deriv Secu Acqu (A) or Dispo | f erivative ecurities cquired (M sports) or isposed (D) nstr. 3, 4 nd 5) | | 5. Date Exercisable and Expiration Date Month/Day/Year) Date Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) Amoun or Numbe of Title Shares | | nt er | | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | y [6] | 10. Ownership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

Remarks:

/s/ Larry Miller, Attorney-in-Fact for Asit Parikh

05/16/2022

** 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.