FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington.	D.C.	20549

Washington, 2101 200 10	
STATEMENT OF CHANGES IN BENEFICIAL	OWNEDSHID
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OMB APPROVAL								
OMB Number: 3235-028								
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	Check this box if no longer subject to
)	Section 16. Form 4 or Form 5
J	obligations may continue. See
	Instruction 1/h)

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* TAKEDA PHARMACEUTICAL CO LTD				-	2. Issuer Name and Ticker or Trading Symbol Phathom Pharmaceuticals, Inc. [PHAT]									ationship of k all applical Director	ble)	Perso	10% Ow		
(Last) (First) (Middle) 1-1, NIHONBASHI-HONCHO 2-CHOME					3. Date of Earliest Transaction (Month/Day/Year) 11/04/2021									Officer (g below)	give title		Other (s below)	pecify	
(Street) CHUO-F	KU, M	10	103-8668		4. If Amendment, Date of Original Filed (Month					(Month/Day/	(Year)		Line)	6. Individual or Joint/Group Filing (Check Applicat Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	itate)	(Zip)																
		Та	able I - Nor	n-Deriva	tive S	ecu	rities Acc	uired,	Dis	posed of	, or B	enef	icially	Owned					
Date				Execution Dath/Day/Year) if any		Execution Date,				es Acquired (A) or Of (D) (Instr. 3, 4 a			5. Amount Securities Beneficial Owned Fo Reported	ly	Form:	Direct Indirect I	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	Amount (A)		Price	Transaction(s) (Instr. 3 and 4)				,iiisti. 4)		
Common Stock 1				11/04/2	04/2021			X		228,696	(1)	A	\$0 ⁽¹⁾	1,100,001			D		
Common Stock			11/04/2	11/04/2021			S		1(1)	1	D	\$ 19	1,100,0		00,000				
Common Stock 11				11/04/2	04/2021			S		1,000,000		D	\$20.85	100,000			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)	Execution Date,	Code	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exerci on Da Day/Yo		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	OI N	mount umber Shares		Transaction(s) (Instr. 4)				
Warrants	\$0.0 ⁽¹⁾	11/04/2021		X			228,696 ⁽¹⁾	10/29/2019		05/07/2029 Common Stock 228		28,696	\$0	7,359,304		D			

Explanation of Responses:

1. On November 4, 2021, the Reporting Person exercised a Warrant to purchase 228,696 shares of the Issuers common stock with an exercise price of \$0.00004613 per share. The Reporting Person paid the exercise price on a cashless basis in accordance with the terms of such Warrants, resulting in the Issuer withholding a number of shares (or portion thereof) to satisfy the exercise price and issuing to the Reporting Person the remaining number of shares. The Issuer also paid the Reporting Person \$8.45 in lieu of a fractional share.

Remarks:

/s/ Amit Singh, Senior Vice President and Head of Treasury of Takeda Pharmaceutical

11/08/2021

Company Limited

** Signature of Reporting Person Dat

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.