FORM 4 Check this box if no

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPR	ROVAL
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longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN 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

(Print of Type Responses	<i>i)</i>												
1. Name and Address of Edick Paul R	2. Issuer Name and Ticker or Trading Symbol Iterum Therapeutics plc [ITRM]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
C/O ITERUM THER 3, HARCOURT CEN	3. Date of Earliest Transaction (Month/Day/Year) 05/30/2018							Other (specify bel	low)				
(Street) DUBLIN, L2 2			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tal	ble I - Non-	Deri	vative Se	curities	Acqui	ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if	3. Transact Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of	Beneficially Owned Following	Ownership Form: Beneficia Direct (D) Ownershi	Beneficial Ownership		
				Code	V	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)		
Ordinary Shares		05/30/2018		C		15,913	A	(1)	19,095	D			
Ordinary Shares		05/30/2018		C		4,050 A (2)		<u>(2)</u>	23,145	D			
Ordinary Shares		05/30/2018		C		1,591 A (3)			24,736	D			
Reminder: Report on a s	eparate line for e	ach class of securition	es beneficially owne	d directly o	r indi	rectly.							

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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 control number.

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Security (Instr. 3)	Conversion	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	ion	of Deri Secu Acq (A) Disp (D)	vative urities uired or bosed of er. 3, 4,	and Expirati	5. Date Exercisable and Expiration Date Month/Day/Year) 7. Title and Amount of Underlying Securities (Instr. 3 and 4)			Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial
				Code	V	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Series A Preferred Shares	<u>(1)</u>	05/30/2018		С			15,913	(1)	<u>(4)</u>	Ordinary Shares	15,913	\$ 0	0	D	
Series B- 1 Preferred Shares		05/30/2018		С			4,050	(2)	<u>(4)</u>	Ordinary Shares	4,050	\$ 0	0	D	
Series B- 2 Preferred Shares	(3)	05/30/2018		С			1,591	(3)	<u>(4)</u>	Ordinary Shares	1,591	\$ 0	0	D	

Reporting Owners

D. C. N. (All	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Edick Paul R C/O ITERUM THERAPEUTICS PLC, BLK 2 FL. 3, HARCOURT CENTRE, HARCOURT ST. DUBLIN, L2 2	X							

Signatures

/s/ Paul R. Edick	05/30/2018
**Signature of Reporting	Date

Explanation of Responses:

- * 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).
- (1) The Series A Preferred Shares automatically converted into Ordinary Shares of the Issuer on a 1-to-1 basis upon closing of the initial public offering of the Issuer.
- (2) The Series B-1 Preferred Shares automatically converted into Ordinary Shares of the Issuer on a 1-to-1 basis upon closing of the initial public offering of the Issuer.
- (3) The Series B-2 Preferred Shares automatically converted into Ordinary Shares of the Issuer on a 1-to-1 basis upon closing of the initial public offering of the Issuer.
- (4) Not applicable.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.