| FORM | 4 |
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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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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

| (Fint of Type Responses |) | | | | | | | | | | |
|--|--|---------------------|--------------------------------------|---------------|-------------|--|---|------------------------------|--|--|-------------------------|
| 1. Name and Address of Dunne Michael W. | 2. Issuer Name and Iterum Therapeu | | | - · | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director10% Owner | | | | | |
| (Last) C/O ITERUM THE PLC, FITZWILLIA CLOSE | | | 3. Date of Earliest Tr 06/15/2022 | ransaction (I | Month | n/Day/Yea | ır) | Officer (give title below)Ot | her (specify belo | 9W) | |
| DUBLIN 2, L2 | | 4. If Amendment, Da | ate 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 I - No | on-De | erivative S | Securitie | s Acqu | ired, Disposed of, or Beneficially Own | ied | |
| 1.Title of Security (Instr. 3) | Date Execution Date, (Month/Day/Year) any | | Execution Date, if any | (Instr. 8) | | | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: | Beneficial |
| | | | (Month/Day/Year) | Code | v | Amount | (A) or (D) | Price | (Instr. 3 and 4) | Direct (D) or Indirect (I) (Instr. 4) | Ownership (Instr. 4) |

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

Persons who respond to the collection of information contained SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

| | | - | . (4 | e.g., puts | , cai | iis, warran | is, op | puons, conve | ruble secul | illes) | | _ | - | | |
|---|---|--------------------------|---|------------|-----------|-------------|--------|---|--------------------|--|-------------------------------------|--------------------------------------|--|---|-------------------------|
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code | tion) | Derivative | | 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 | Ownership Form of Derivative Security: Direct (D) or Indirect (I) | Beneficial Ownership |
| | | | | Code | v | (A) | | Exercisable | Expiration Date | | Amount or Number of Shares | | (Instr. 4) | (Instr. 4) | |
| Restricted Share Units | <u>(1)</u> | 06/15/2022 | | А | | 237,795 | | <u>(2)</u> | <u>(2)</u> | Ordinary Shares | 237,795 | \$ 0 | 237,795 | D | |

Reporting Owners

| | Relationships | | | | | | |
|---|---------------|--------------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| Dunne Michael W. C/O ITERUM THERAPEUTICS PLC FITZWILLIAM COURT, FL. 1, LEESON CLOSE DUBLIN 2, L2 | Х | | | | | | |

Signatures

/s/ Michael W. Dunne

06/17/2022 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) Each restricted share unit ("RSU") represents the contingent right to receive one ordinary share upon vesting of the RSU.

(2) Subject to the reporting person providing continuous service to the Issuer and the other terms and conditions of the Issuer's 2018 Amended and Restated Equity Incentive Plan, as amended, the RSUs shall vest in full on June 15, 2023.

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.