FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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OMB APPROVAL											
OMB Number:	3235-0287										

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028
	Estimated average bu	ırden
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response:	0.9
or Section 30(h) of the Investment Company Act of 1940		

defense	ed to satisfy the e conditions of ee Instruction 1	Rule 10b5-																		
Name and Address of Reporting Person*     Oren Ilan				2. Issuer Name <b>and</b> Ticker or Trading Symbol Roivant Sciences Ltd. [ ROIV ]									ck all app	tionship of Reporting all applicable) Director Officer (give title below)		rson(s) to Is				
(Last) (First) (Middle) C/O ROIVANT SCIENCES LTD.					3. Date of Earliest Transaction (Month/Day/Year) 09/12/2024												Other (s	specify		
7TH FLO	OOR, 50 BI	ROADWAY			4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Street) LONDON X0 SW1H 0DB				)DB										Line)	-	filed by On- filed by Mo on		•		
(City)	(St	ate) (Z	Zip)																	
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	or B	enet	ficiall	y Own	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)				Exec		Deemed cution Date, y nth/Day/Year)					es Acquired (A Of (D) (Instr. 3,			Securit Benefic Owned	5. Amount of Securities Seneficially Dwned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount (A		or P	rice		action(s) 3 and 4)			(Instr. 4)	
Common	Shares			09/12/2	2024				J		3,487(1)	D	\$	12.12	9:	5,553		D		
		Tal									osed of, o				Owne	d				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Security or Exercise (Month/Day/Year) if any				Transaction of Code (Instr. Derivat		rative rities sired r osed )	6. Date Exerc Expiration Da (Month/Day/V		ite	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of erivative ecurity astr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	y Ov Fo Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	er						

## **Explanation of Responses:**

1. Represents the "net settlement" by the Issuer of RSUs previously granted to the reporting person in order to satisfy applicable tax withholding obligations in connection with the vesting and settlement of such RSUs.

By: /s/ Jo Chen, as Attorneyin-Fact for Ilan Oren

09/16/2024

\*\* 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.