FORM 4

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

Washington, D.C. 20549

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

ı	OMB APPRO	JVAL
	OMB Number:	3235-0287
l	Estimated average burd	len
	hours per response:	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* <u>Roivant Sciences Ltd.</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol Axovant Sciences Ltd. [ AXON ]											licable)	Ü	erson(s) to Is		
(Last) (First) (Middle) SUITE 1, 3RD FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 12/18/2018										Office	er (give title v)		Other below	(specify		
11-12 ST. JAMES'S SQUARE					4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) LONDON X0 SW1Y 4LB			LB											X Form filed by One Reporting Person  Form filed by More than One Reporting  Person							
(City)	(51		Zip)	n Doriv	ativo	Sor	ouritio	νς Λο <i>ι</i>	nuirod	Dic	nocod o	ef or	Pone	ficia	ally C	)wno	<u>.</u>				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					ction	tion 2A. Deemed Execution Date,		3. 4. Securition			ties Acquired (A) of (D) (Instr. 3, 4			or 5. Amo and 5) Securi Benefi Owned Repor		ount of ities ficially d Following		Ownership rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code V Amount (A		(A) or (D)	Pric			action(s) . 3 and 4)									
Common Shares, par value \$0.00001 per share					3/2018						10,000,0	10,000,000 A		\$	\$1 99,2		),285,714		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)		4. Transaction Code (Instr. 8)		n of		6. Date E Expiration (Month/E	on Dat		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Prio Deriva Secur (Instr.	ative rity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	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	Amo or Num of Sha	ber							

**Explanation of Responses:** 

/s/ Marianne Romeo Dinsmore, 12/20/2018 as Authorized Signatory

\*\* 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.