FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287		
	Estimated average burden			

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 7			_						
Name and Address of Reporting Person* Vymor Palkhi				2. Issuer Name and Ticker or Trading Symbol Roivant Sciences Ltd. [ROIV]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
<u>Kumar Rakhi</u>			Troit Sciences Eta. [Roll]								Direc	tor		10% Ov	vner				
(Loot)	/Eir	(Fisch) (Middle)				3. Date of Earliest Transaction (Month/Day/Year)							X	Office below			Other (s below)	specify	
(Last) (First) (Middle) C/O ROIVANT SCIENCES LTD.				02/20/2024								Chief Accounting Officer							
7TH FLOOR, 50 BROADWAY				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indiv	6. Individual or Joint/Group Filing (Check Applicable ine)								
												X	X Form filed by One Reporting Person						
(Street)	N X0	S	SW1H 0DB										Form filed by More than One Reporting Person						
(City) (State) (Zip)							Rule 10b5-1(c) Transaction Indication												
						X Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	l - No	n-Deriva	tive S	ecuri	ties Ac	quired	, Dis	posed of,	, or E	Bene	ficially	Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			Day/Year) Exec		emed tion Date, n/Day/Year)	3. Transaction Code (Instr. 8)						Securit Benefic Owned	urities reficially ned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) (D)	or P	rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Shares 02/20/2			024			F		1,508(1)	D	9	611.54	189,275		D					
		Tal								osed of, convertible				Owne	d				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Decurity or Exercise (Month/Day/Year) if any		ion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Der Sed (Ins	rice of ivative curity ctr. 5)	9. Number 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)		
										Amoi or Numl									

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.

Date

Exercisable

Expiration Date

By: /s/ Jo Chen, as Attorneyin-Fact for Rakhi Kumar

02/22/2024

** 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.