SEC For	m 4 FORM 4	4 L	JNITED S	STAT	TES	S SI			SANE Ington, D.C.			NGE	СС	DMN	IISSI	ON	
X Section obligati	this box if no lo 16. Form 4 or ons may contin ion 1(b).	Form 5	STATE		d purs	uant	to Section	on 16(a) of the Se	curiti	es Exchan	ge Act o	of 193		SHIF	5	
	nd Address of SSOCIATES	Reporting Person [*] GP LLC			2. 15	ssue	r Name a	and Tic	ker or Trac	ling S	Symbol				Relatio Check al X I		С
(Last) 444 MAI	(Fi DISON AVI	rst) (ENUE, 21ST FL	Middle) OOR				of Earlies 2019	st Trans	saction (Mo	onth/[Day/Year)					Officer below)	
(Street) NEW YORK NY 10022				4. lf	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Julian			
(City)	(St	ate) (Zip)													Persor	ו
4 THE - 64			e I - Non-D			e Se	2A. Deer		quired,	Dis		,					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date, if any (Month/Day/Year)		Transa Code (I	Transaction Dispose Code (Instr. 5)		ties Acquired (A) o d Of (D) (Instr. 3, 4		(A) or 3, 4 a	and Securities Beneficia Owned Fe Reported				
									Code	v	Amount	(D		Price	e (li	ansact nstr. 3 a	ti
		Ta	able II - Der (e.g						ired, Di options						y Owr	ned	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transactio Code (Inst 8)				6. Date Exercisable and Expiration Date (Month/Day/Year))	7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		str. 3	8. Price Derivat Securit (Instr. 5	tive d ty S 5) E F F T	
					Code	v	(A)	(D)	Date Exercisat		Expiration Date	Title	Amo or Num of Sha				
	nd Address of SSOCiates	Reporting Person [*]															
(Last) 444 MAI	DISON AVI	(First) ENUE, 21ST FL	(Middle) OOR														
(Street) NEW YC	ORK	NY	10022			_											
(City)		(State)	(Zip)			_											
							4										

1. Name and Address of Reporting Person* <u>QVT Fund V LP</u>

(Middle) (Last) (First) **190 ELGIN AVENUE**

(City)	(State)	(Zip)				
(Street) GEORGE TOWN, GRAND CAYMAN	E9	KY1-9005				

Explanation of Responses:

Remarks:

(1) On July 10, 2019, the board of directors of Roivant Sciences Ltd. ("Roivant") adopted changes to Roivant's internal governance concerning Roivant's dispositive power over the Common Shares and other matters relating to oversight of Roivant's business and governance. As a result of these changes, Roivant's shareholders (including the Reporting Persons) no longer have the right to override certain decisions of Roivan's board of directors concerning dispositions of the Common Shares via a unanimous vote (and each thus no longer has the individual right to veto dispositive decisions of Roivant's board of directors), and so have ceased to have beneficial ownership of the Common Shares via a unanimous vote (and each thus no longer has the individual right to veto dispositive decisions of Roivant's board of directors), and so have ceased to have beneficial ownership of the Common Shares directly owned by Roivant. Roivant's ownership of the Issuer's Common Shares are sult of the purchase or sale of Common Shares of the Issuer by any party, including the Reporting Persons. QVT may be deemed to be a director by virtue of the fact that Dr. Keith Manchester, on behalf of Roivant, currently serves on the board of directors of the Issuer. Dr. Manchester also holds 113,915 stock options awarded to him, which he holds for the benefit of certain funds under management of QVT Financial LP.

OMB APPROVAL

10% Owner

below)

Other (specify

7. Nature

of Indirect

Beneficial Ownership

11. Nature

of Indirect Beneficial

Ownership

(Instr. 4)

(Instr. 4)

3235-0287

0.5

OMB Number:

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)

5. Amount of

Beneficially Owned Following

9. Number of

derivative

Securities

Owned Following

Beneficially

Reported Transaction(s) (Instr. 4)

Reported Transaction(s)

(Instr. 3 and 4)

Securities

Officer (give title

Estimated average burden hours per response:

Х

Х

6. Ownership

Form: Direct

10

Ownership

Form: Direct (D) or Indirect (I) (Instr. 4)

(D) or Indirect (I) (Instr. 4)

See Remarks

6. Individual or Joint/Group Filing (Check Applicable

Form filed by One Reporting Person Form filed by More than One Reporting

** 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.