

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL	
OMB Number:	3235-0287
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1. Name and Address of Reporting Person* <u>Takeda Pharmaceuticals International AG</u> (Last) (First) (Middle) THURGAUERSTRASSE 130 GLATTPARK-OPFIKON (Street) ZURICH V8 8152 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Myovant Sciences Ltd. [MYOV]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 12/15/2016	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Shares	12/15/2016		M		22,141	A	\$0 ⁽¹⁾	7,390,530	D	
Common Shares	01/17/2017		M		5,727	A	\$0 ⁽¹⁾	7,396,257	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)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (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 Exercisable	Expiration Date						Title
Warrant to Purchase Common Shares	(1)	12/15/2016		M			22,141	(2)	(3)	Common Shares	22,141	\$0	0 ⁽⁴⁾	D	
Warrant to Purchase Common Shares	(1)	01/17/2017		M			5,727	(2)	(3)	Common Shares	5,727	\$0	0 ⁽⁴⁾	D	

Explanation of Responses:

- \$0.000017727 per share.
- At any time following the Issuer's issuance of any class of capital shares, if necessary to allow the Reporting Person, together with its affiliates, to maintain a 12% ownership in the Issuer, as determined after such exercise.
- Upon the earlier of (A) April 30, 2017 and (B) a change of control of the Issuer, unless such change in control results in a privately-held entity in which the holders of 40% or more of the equity securities, calculated on a fully-diluted basis, of the surviving entity are held by persons and entities who were affiliates of the Issuer prior to such change in control.
- An indeterminate number of capital shares necessary to allow the Reporting Person, together with its affiliates, to maintain a 12% ownership interest in the Issuer, as determined after such exercise.

Remarks:

/s/ Marcello Agosti, Head of Global Business Development 03/13/2017

** 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.