FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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OMB APPROVAL							
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Marek David C				2. Issuer Name <b>and</b> Ticker or Trading Symbol  Myovant Sciences Ltd. [ MYOV ]							(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Marek David C					2.23 State Sciences Day [ 1110 v ]							X	Director			10% Ov	vner	
(Last)	(F	irst)	(Middle)		Date of Earliest Transaction (Month/Day/Year)						<b>—</b> X	Officer ( below)	give title		Other (s	specify		
C/O MYOVANT SCIENCES INC.					01/15/2021							Principal Executive Officer						
2000 SIERRA POINT PARKWAY, 9TH FLOOR				t [														
					4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Inc	6. Individual or Joint/Group Filing (Check Applicable						
(Street) BRISBA	NE C.	Δ	94005										1 ′	X Form filed by One Reporting Person				
— — —	INE C.	<b>A</b>												Form filed by More than One Reporting Person				ting
(City)	(S	tate)	(Zip)		Feisui													
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date			2. Transac Date [Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disp			curities Acquired (A) o sed Of (D) (Instr. 3, 4			5. Amoun Securities Beneficia Owned Fo	s lly ollowing	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount (A) or (D)		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Common Shares				01/15/2	5/2021		A		223,076 <sup>(1)</sup> A \$		\$0.00	223,076			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
Derivative Conversion Date Execution D Security or Exercise (Month/Day/Year) if any			3A. Deemed Execution Date if any (Month/Day/Ye	Code (Instr.		Derivative E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Cod	e V	(A)		Date Exercisab		Expiration Date	Title	OI N	mount r umber f Shares		(Instr. 4)			
Stock Option (Right to Buy)	\$20.54	01/15/2021		A		306,427		(2)	0	1/14/2031	Comm		06,427	\$0.00	306,42	27	D	

## **Explanation of Responses:**

- 1. The common shares are to be acquired upon the vesting of certain Restricted Stock Units ("RSUs") granted to the Reporting Person. The RSUs shall vest as follows: 1/4 of the common shares underlying this restricted stock unit award under the Myovant Sciences Ltd. 2020 Inducement Plan vest on January 15, 2022, and 1/16 of the common shares underlying this restricted stock unit award vest each quarter thereafter, provided the Reporting Person has provided continuous service to the Issuer or its affiliates on each such date.
- 2. 1/4 of the common shares underlying this option under the Myovant Sciences Ltd. 2020 Inducement Plan vest on January 15, 2022, and 1/16 of the common shares underlying this option vest each quarter thereafter, provided the Reporting Person has provided continuous service to the Issuer or its affiliates on each such date.

## Remarks:

/s/ Matthew Lang, Attorney-in-01/20/2021 **fact** 

\*\* 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.