## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Number: 3235-0287 Estimated average burden hours per response: 0.5

10% Owner

Other (specify

5. Relationship of Reporting Person(s) to Issuer

Officer (give title

(Check all applicable) X Director

purchase or issuer that is affirmative d	truction or written plan for sale of equity securities of s intended to satisfy the efense conditions of Rule see Instruction 10.						
	ddress of Reporting Per	rson*	2. Issuer Name <b>and</b> Ticker or Trading Symbol Immunovant, Inc. [ IMVT ]				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/01/2025				
	NOVANT, INC. 37TH STREET. 6TH	I FLOOR	4. If Amendment, Date of Original Filed (Month/Da				

(Last)	(FIrst)	(Middle)	00,01,2020		Delow)	below)
C/O IMMUNOVANT, INC. 320 WEST 37TH STREET, 6TH FLOOR (Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivic	lual or Joint/Group Filing (Che Form filed by One Reporting Form filed by More than One	Person
NEW YORK	NY	10018				
(City)	(State)	(Zip)				

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date,	3. Transac Code (Ir 8)	tion	4. Securities Ac Disposed Of (D			Securities Beneficially Owned Following Reported	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	Transaction(s) (Instr. 3 and 4)		
Common Stock	05/01/2025		Α		25,016(1)	A	\$ <mark>0</mark>	25,016	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. Transac Code (In 8)		Derivative		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	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	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Stock Option (Right to Buy)	\$15.9	05/01/2025		Α		35,234		(2)	05/01/2035	Common Stock	35,234	\$ <mark>0</mark>	35,234	D	

## Explanation of Responses:

1. These restricted stock units ("RSUs") were granted pursuant to the Issuer's 2019 Equity Incentive Plan (the "Plan"). Each RSU represents a contingent right to receive one share of common stock upon the vesting of the unit. The RSUs will vest in three equal annual installments beginning on May 1, 2025, subject to the Reporting Person's continuous service to the Issuer as of such date

2. These options were granted pursuant to the Plan. The shares underlying the options will vest in three equal annual installments beginning on May 1, 2025, subject to the Reporting Person's continuous service to the Issuer as of such date

> /s/ Christopher Van Tuyl, Attorney-in-Fact for Robert <u>Susman</u> \*\* Signature of Reporting Person Date

05/05/2025

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.