FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

	OMB Number:	3235-0287
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ı	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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule

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

10b5-1(c). See In:	struction 10.							
1. Name and Address of Reporting Person* Butchko Julia G.			2. Issuer Name and Ticker or Trading Symbol Immunovant, Inc. [IMVT]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
			3. Date of Earliest Transaction (Month/Day/Year) 04/02/2024	X Officer (give title Other (specify below) Chief Development Officer				
320 W 37TH STREET, 6TH FLOOR (Street) NEW YORK NY 10018			4. If Amendment, Date of Original Filed (Month/Day/Year)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(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)	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	Form: Direct (D)	Beneficial Ownership
			Code	v	Amount (A) or (D) Price		Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	04/02/2024		A		54,978(1)	A	\$0	462,795	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)		Derivative	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)	\$30.78	04/02/2024		A		68,723		(2)	04/02/2034	Common Stock	68,723	\$0	68,723	D	

Explanation of Responses:

- 1. These restricted stock units ("RSUs") were granted pursuant to the Issuer's 2019 Equity Incentive Plan. Each RSU represents a contingent right to receive one share of common stock upon the vesting of the unit. The RSUs will vest as to 25% of the units on April 2, 2025, and the remainder will vest in substantially equal installments on a quarterly basis over three years thereafter, subject to the Reporting Person's continuous service to the Issuer as of such date.
- 2. The shares underlying the options will vest as to 25% of the shares on April 2, 2025 and the remainder will vest in 36 substantially equal monthly installments over three years thereafter, subject to the Reporting Person's continuous service to the Issuer as of such date.

Remarks:

/s/ Eva Renee Barnett, attorney-infact for Julia G. Butchko

** 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.