FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington. | D.C. | 20549 | |
|-------------|------|-------|--|

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|
| | | | |

| OMB APPROVAL | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | |
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| hours per response: | 0.5 | | | | | | |

| | Check this box if no longer subject to |
|---|--|
| ٦ | Section 16. Form 4 or Form 5 obligations may continue. See |
| J | obligations may continue. See |
| | Instruction 1(h) |

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* Roman Brian | | | | | 2. Issuer Name and Ticker or Trading Symbol Viatris Inc [VTRS] | | | | | | (Ch | eck all applica Director | | | 10% Owr | ner | |
|--|---------------|------------------|--|---|---|--|---------------------|--------------------|--|-----------------------------|---|--|---|--|--|-----------|--|
| (Last) 1000 MY | (F LAN BOU | irst) ILEVARD | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 12/21/2021 | | | | | | | below) | | | below) | cony | |
| (Street) CANON (City) | SBURG PA | A State) | 15317 (Zip) | 4 | . If Am | endment, C | Date of | f Original Fil | ed (Mo | lonth/Da <u>r</u> | y/Year) | Line | X Form fil | int/Group Fil ed by One R ed by More t | eportin | ng Person | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans. Date (Month/I | | | e | action 2A. Deemed Execution Date, if any (Month/Day/Yea | | e, Transaction Dispose Code (Instr. | | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 and | | 5. Amoun Securities Beneficial Owned Fo | s F lly (I | i. Owner Form: Di D) or Inc I) (Instr. | irect In direct B . 4) O | 7. Nature of ndirect Beneficial Ownership | | |
| | | | | | | | Code | , , | Amount | (A) o (D) | Price | Transaction | ransaction(s) Instr. 3 and 4) | | (Instr. 4) | | |
| 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 (Instr. 3) 3. Transaction Date Execution Date, (Month/Day/Year) (Month/Day/Year) | | | ansaction Derivat ode (Instr. Securit Acquire or Disp | | curities quired (A) Disposed (D) (Instr. 3, | | ate | e Securities Under | | Underlying Security | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | y D | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code | | | Date Exercisable | | oiration te | Amou Numb Title Share | | | (Instr. 4) | 11(3) | | | |
| Dividend Equivalent Units | (1) | 12/21/2021 | | A | | 336.1623 | | (1) | | (1) | Common Stock | 336.162 | \$0.00 | 936.556 | | D | |

Explanation of Responses:

1. Represents dividend equivalent units ("DEUs") that accrued with respect to restricted stock units ("RSUs") previously granted on March 2, 2021 and vest on the same schedule as the underlying RSUs.

Remarks:

/s/ Kevin Macikowski, by power 12/23/2021 of attorney

** Signature of Reporting Person

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.