| SEC Form 4 |  |
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## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

| OMB Number:              | 3235-0287 |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|
| Estimated average burden |           |  |  |  |  |  |  |
| 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).

FORM 4

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

|  |   |  |  |                                 | UI Sec  | ction 30(h)  | ortine | invesimen  | t Con | прапу Асі        | 01 1940         |  |  |  |    |  |  |  |
|--|---|--|--|---------------------------------|---|--|--------|--|-------|------------------|-----------------|--|--|--|----|--|--|--|
| 1. Name and Address of Reporting Person <sup>*</sup><br>MARK RICHARD A |   |  |  |                                 | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Viatris Inc VTRS |  |        |  |       |                  |                 |  | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable) |  |    |  |  |  |
|  |   |  |  |                                 |   |  |        | -  |       |                  |                 |  | X Director   |  |    | 10% Ow   | ner  |  |
| (Last) (First) (Middle)  |   |  |  |                                 | 3. Date of Earliest Transaction (Month/Day/Year)<br>06/21/2021      |  |        |  |       |                  |                 |  | Officer (<br>below)  | give title   |    | Other (sp<br>below)  | becify   |  |
|  |   |  |  |                                 |   |  |        |  |       |                  |                 |  |  |  |    |  |  |  |
|  |   |  |  |                                 | 4. If Amendment, Date of Original Filed (Month/Day/Year)            |  |        |  |       |                  |                 |  | 6. Individual or Joint/Group Filing (Check Applicable Line)                |  |    |  |  |  |
| (Street)   |   |  |  |                                 |   |  |        |  |       |                  |                 | X Form fil   |  |  |    |  |  |  |
| CANONSBURG PA 15317  |   |  |  |                                 |   |  |        |  |       |                  |                 |  | Form filed by More than One Reporting<br>Person                            |  |    |  | ng   |  |
| (City)   | (5  | State)                                     | (Zip)  |                                 |   |  |        |  |       |                  |                 |  |  |  |    |  |  |  |
|  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  |  |  |                                 |   |  |        |  |       |                  |                 |  |  |  |    |  |  |  |
| Date   |   |  |  | 2. Transac<br>Date<br>(Month/Da |   | 2A. Deemed<br>Execution Date<br>if any<br>(Month/Day/Yea   |        | Code (Inst   |       |                  |                 | red (A) or<br>str. 3, 4 and                        | Beneficia<br>Owned Fo  | s Form<br>Ily (D) o<br>ollowing (I) (In  |    | Direct Indirect E<br>tr. 4) C  | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership                |  |
|  |   |  |  |                                 |   |  |        | Code   | v     | Amount           | (A)<br>(D)      | or Price   | Reported<br>Transactio<br>(Instr. 3 au                                     | ion(s)   |    |  | Instr. 4)  |  |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned<br>(e.g., puts, calls, warrants, options, convertible securities) |  |  |                                 |   |  |        |  |       |                  |                 |  |  |  |    |  |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                    | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security   | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date<br>if any<br>(Month/Day/Yea | Code                            | action<br>(Instr.   | 5. Number of<br>Derivative<br>Securities<br>Acquired (A)<br>or Disposed<br>of (D) (Instr. 3,<br>4 and 5) |        | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |       |                  | Securitie       | nd Amount o<br>s Underlying<br>e Security<br>nd 4) | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)                        | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s) |    | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |   |  |  | Code                            | le V  | (A)  |        | Date<br>Exercisabl   |       | xpiration<br>ate | Title           | Amount of<br>Number of<br>Shares                   |  | (Instr. 4)   |    |  |  |  |
| Dividend<br>Equivalent<br>Units  | (1)   | 06/21/2021                                 |  | A                               |   | 101.1537   |        | (1)  |       | (1)              | Common<br>Stock | 101.153  | 7 \$0.00   | 101.15   | 37 | D  |  |  |
| Evolopatio   |   |  |  |                                 |   |  |        |  |       |                  |                 | -  |  |  |    |  |  |  |

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.

/s/ Kevin Macikowski, by power of attorney

of attorney

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $\ast$  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.