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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vasiliigion,	D.C.	20070

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* Coric Vlad					2. Issuer Name and Ticker or Trading Symbol Biohaven Ltd. [BHVN]									(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last)	(Fi	,	Middle)			te of E 2/202		Trans	action (N	Month	(Day/Year)] :	belov	Officer (give title below) Chief Executive (pecify		
215 CHURCH STREET						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NEW HA	AVEN CT	Γ 0	6510	•											X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	ate) (2	Zip)	Rule 10b5-1(c)					Transaction Indication												
					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													ided to			
		Table	I - No	n-Deriva	ative S	ecui	rities	Acq	uired,	Dis	posed of	, or	Ben	eficia	lly Own	ed					
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)						Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ect I	7. Nature of Indirect Beneficial Ownership					
							Code	v	Amount	(A) or (D)		Price	Repor Transa (Instr.	ted action(s) 3 and 4)			Instr. 4)				
Common	Common Shares 04/22/20		2024				P		121,951	1)	A	\$41	1,7	88,417	D						
Common	Shares														10	09,565	I	4	By: 401(K) Plan		
Common Shares													84	40,890	I		By: The Vlad Coric Family Trust ⁽²⁾				
Common Shares													40	407,213			By: The Vladimir Coric Marital Trust ⁽²⁾				
		Tal									osed of, o				/ Owne	d					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dec Executi		e, Transac Code (Ir		5. Number ction of		•	Exerc ion Da	sable and 7. Title and te Amount of		nstr.	3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	(D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	Code V (A) (D)			Date Exercis	able	Expiration Date	Title	Amoun or Number of Shares								

Explanation of Responses:

- 1. Represents common shares acquired in an underwritten public offering.
- 2. These Common Shares are held in a trust for the benefit of the Reporting Person's family members, excluding the Reporting Person. The Reporting Person's spouse is trustee of the trust. The Reporting Person disclaims beneficial ownership of these securities, and the inclusion of the securities held by the trust in this report and prior Section 16 filings by the Reporting Person is not an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose

Remarks:

/s/ George Clark, Attorney-in-

04/22/2024

Fact

** 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.