FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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*     Poll Claire						2. Issuer Name <b>and</b> Ticker or Trading Symbol Verona Pharma plc [ VRNA ]									k all app Direc	tor		10% Ov	wner
(Last) 3 MORE	(Fir	st) (t RIVERSIDE	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/01/2021									X	below	ficer (give title low) General Co		Other (specify below)		
(Street) LONDO (City)	N X0	ate) (Z	SE1 2F			4. If Amendment, Date of Original Filed (Month/Day/Year)									vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/					Execution Date,			_	3. Transa Code ( 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			and 5) Securi Benefi Owned		ties cially I Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	(A) or (D)	Pric	e	Report Transa (Instr.	ted action(s) 3 and 4)			(Instr. 4)	
Ordinary	21				<b>F</b> <sup>(2)</sup>		319,600	D	\$0.	785 <sup>(3)</sup>	2,4	2,443,039		D					
Ordinary Shares <sup>(1)</sup> 08/01/20						21				V	360,400	D		\$ <mark>0</mark>	2,08	32,639(4)		D	
Ordinary Shares <sup>(1)</sup> 08/01/20					)21				G	v	360,400	A		\$ <mark>0</mark>	48	483,840			By Trust <sup>(5)</sup>
	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)	ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				ransaction code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		te Exer ation D th/Day/		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Ser (In:	rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A) (D)		Date Exercisable		Expiration Date	of Title Share							

## **Explanation of Responses:**

- 1. Reported securities are represented by American Depositary Shares ("ADSs") (unless otherwise indicated), each of which represents eight (8) Ordinary Shares of the Issuer.
- 2. Represents the number of Ordinary Shares withheld to satisfy the tax withholding obligation in connection with the vesting of certain previously reported Restricted Share Units.
- 3. The price reported represents the closing price of the Issuer's ADSs on the Nasdaq Stock Market LLC on July 30, 2021 divided by eight (8).
- 4. Consists of (i) 2,040,000 Ordinary Shares underlying Restricted Share Units, each of which represents a contingent right to receive one (1) Ordinary Share of the Issuer (which may be represented by 255,000 ADSs); (ii) 42,632 Ordinary Shares underlying 5,329 ADSs; and (iii) 7 Ordinary Shares.
- 5. Held by a family trust of which (a) the Reporting Person and spouse are trustees and (b) the Reporting Person and members of her immediate family are the sole beneficiaries of the trust.

/s/ Claire Poll

08/03/2021

\*\* 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.