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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

1 0		, °,		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
BRETT K		<u>Incravance Diopharma, me.</u> [IDFII]		Director	10% Owner			
			X	Officer (give title below)	Other (specify below)			
(First) NCE BIOPH	(Middle) ARMA US, INC.	3. Date of Earliest Transaction (Month/Day/Year) 06/03/2014		VP-Clinical	,			
BLVD								
		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group Fili	ing (Check Applicable			
CA	94080		X	Form filed by One Re	eporting Person			
	34000			Form filed by More th Person	an One Reporting			
(State)	(Zip)							
	BRETT K (First) NCE BIOPH/ BLVD CA	NCE BIOPHARMA US, INC. BLVD CA 94080	BRETT K Theravance Biopharma, Inc. [TBPH] (First) (Middle) NCE BIOPHARMA US, INC. 3. Date of Earliest Transaction (Month/Day/Year) 06/03/2014 4. If Amendment, Date of Original Filed (Month/Day/Year) CA 94080	BRETT K Theravance Biopharma, Inc. [TBPH] (Check (First) (Middle) NCE BIOPHARMA US, INC. 3. Date of Earliest Transaction (Month/Day/Year) 06/03/2014 BLVD 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Indiv CA 94080 X	BRETT K Theravance Biopharma, Inc. [TBPH] (Check all applicable) (First) (Middle) NCE BIOPHARMA US, INC. 3. Date of Earliest Transaction (Month/Day/Year) Officer (give title below) BLVD 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group FillLine) X Form filed by One Reform filed by More there and the person			

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	Date (Month/Day/Year)	if any '	3. Transa Code (8)		Disposed Of (Disposed Of (D) (Instr. 3, 4 and b)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130. 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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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	1			
Stock Option (Right to Buy)	\$23.51	06/03/2014		A		59,375		(1)	06/02/2024	Common Stock	59,375	\$0	59,375	D	

Explanation of Responses:

1. This option shall vest and become exercisable as follows: (a) with respect to the first 25% of the Company's shares subject to the option on February 20, 2015, subject to the optionee's continuous service through such date and (b) with respect to an additional 1/48th of the Company's shares subject to the option when the optionee completes each month of continuous service thereafter. The option shall be fully vested and exercisable on February 20, 2018 provided the optionee remains in continuous service with the Company through such date.

Brett A. Grimaud, Attorney-in-06/05/2014 Fact

** 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.