FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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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(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

1. Name and Address of Reporting Person* PITZER KENNETH R						2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]											p of Reportii ilicable) tor	ng Pe	rson(s) to 1	
(Last)	(Fir	,	Middle)	IC.		3. Date of Earliest Transaction (Month/Day/Year) 02/20/2017									X	Officer (give title below) SVP, Prod Strat &		ıt & C	below)	
C/O THERAVANCE BIOPHARMA US, INC. 901 GATEWAY BOULEVARD						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Appl Line)					
(Street) SOUTH SAN FRANCISCO CA 94080														X	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)						Execution Date,			Transaction Disposed Of Code (Instr. and 5)				ties Acquired (A) I Of (D) (Instr. 3,			5. Amo Securi Benefi Owned	cially 1	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		Reported Transaction(s) (Instr. 3 and 4)		(111311.7)		(111341. 4)		
Ordinary Shares				02/20/2	017				F		10,030)	D \$33		.78	162,347			D	
	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)	3. Transaction Date (Month/Day/Year)	Execution D		4. Transactic Code (Inst				6. Date E Expiratio (Month/D		Amount of Securities Underlying Derivative Security (Inst		ıstr.	8. Pr of Deri Secu (Inst	vative irity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership Form: Direct (D) or Indirect I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	of		mber ares						

Explanation of Responses:

Kenneth R Pitzer

02/22/2017

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).