FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI	Ρ

OMB APPROVAL OMB Number: Estimated average burden 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

1. Name and Address of Reporting Person* HAUMANN BRETT K					Th	2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]											all app	er (give title	ng Pers	10% O	wner (specify		
(Last) (First) (Middle) C/O THERAVANCE BIOPHARMA US, INC.						3. Date of Earliest Transaction (Month/Day/Year) 11/20/2017											SVP	Clin Dev	& Ch	ief Med (Ofc		
901 GATEWAY BLVD					_																		
(Street) SOUTH SAN FRANCISCO CA 94080					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					on		
(City)	(St	ate) (Zip)																				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ur) I	Execution if any	A. Deemed xecution Date, any Month/Day/Year)		Transaction Dispo			rities Acquired (A) ed Of (D) (Instr. 3, 4				Securities I Beneficially		Form (D) o	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Co	de V	Amo	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(instr. 4)		
Ordinary Shares 11/20/					/2017						7,	7,846		5 D		3.58 14		11,496		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	Code (Inst				Expir	te Exerc ation Da th/Day/\	ate			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			vative urity ir. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exerc	cisable	Expira Date	tion	Title	or Nu of	nount mber ares								

Explanation of Responses:

Brett A. Grimaud, Attorney-in-11/22/2017

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.