FORM 4

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours per response:	0.5									

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

1. Name and Address of Reporting Person* PITZER KENNETH R (Last) (First) (Middle) C/O THERAVANCE BIOPHARMA US, INC. 901 GATEWAY BOULEVARD					Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH] Jate of Earliest Transaction (Month/Day/Year) 02/08/2021								(Ch	eck all app Direct Office below	licable) tor er (give title v)		10% Ov Other (s below) Comm Pln	vner specify	
(Street) SOUTH FRANCE	SAN SCO CA	Λ 9	4080 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	e) X Form Form						
		Table	I - Noi	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or I	Bene	ficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)					Execu ly/Year) if any		Deemed cution Date, y nth/Day/Year)		3. Transaction Code (Instr. 8)		es Acquired (A Of (D) (Instr. 3,			d Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A)) or	Price	Transa	Transaction(s) (Instr. 3 and 4)			,,	
Ordinary Shares 02/08/2				2021			A		65,000		A	\$ <mark>0</mark>	40	400,280		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)	ivative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		Transaction Code (Instr. 8) Se Ac (A) Dis of (In an			rative rities ired r osed) : 3, 4	Expiration Date (Month/Day/Year) Date Expiration Date (Month/Day/Year)		te	Amount of Securities Underlying Derivative Security (Ins 3 and 4)		unt ber		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)		

Explanation of Responses:

Brett A. Grimaud, Attorney-

in-Fact.

02/10/2021

** 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.