FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or S	Secti	on 30(h)	of the I	nvestme	nt Co	mpany Act	of 194	10								
1. Name and Address of Reporting Person* Winningham Rick E						2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Willingham Kick E					X										Direc	ctor		10% O	wner		
	 .													_	X	Offic	er (give title		Other (below)	specify	
(Last) (First) (Middle) C/O THERAVANCE BIOPHARMA US, INC.					3. Date of Earliest Transaction (Month/Day/Year) 08/20/2019											Chief Execut			,		
901 GAT	EWAY BO	ULEVARD																			
(Street) SOUTH SAN FRANCISCO CA 94080					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
															X	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (Zip)													FEIS	OII				
		Tabl	e I - No	n-Deriv	ative	Se	curitie	es Acc	quired	, Dis	posed o	f, or	Ben	efici	ally (Owne	ed				
1. Title of Security (Instr. 3) 2. Transa: Date (Month/Date)				ay/Year) if a		Executio if any	A. Deemed execution Date, fany Month/Day/Year)		Transaction Dispose Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3,			nd	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or D)	Price	- 1		ted action(s) 3 and 4)			(Instr. 4)	
Ordinary S	Shares	s 08/20/2019 F 8,678 D \$21.51 1,083,133							D												
Ordinary Shares														92,567			I	By Trust			
		Та									sed of, onvertib				y Ow	ned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	n Date,	Code (Ins				6. Date Exercisab Expiration Date (Month/Day/Year)		e	7. Title and Amount of Securities Underlying Derivative Security (Ins and 4)			Deriv Secu	Price of erivative ecurity estr. 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 Exercisa	able	Expiration Date	Title	or Nu of	nount mber ares							

Explanation of Responses:

Brett A. Grimaud, Attorney-in-

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.