FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

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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).

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

							. ,				<u> </u>									
1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>HAUMANN BRETT K</u>			1	Theravance Diopharma, me. [15111]										Direct	or		10% O	wner		
														_		Office below	r (give title)		Other (below)	specify
(Last)	(Fir	st) (ľ	Middle)			3. Date of Earliest Transaction (Month/Day/Year)										SVP	Clin Doy	ጸ _ተ Ch	ief Med C)fc
C/O THERAVANCE BIOPHARMA US, INC.			11/2	11/20/2019									SVP Clin Dev & Chief Med Ofc							
901 GATEWAY BLVD																				
				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)	A A T													Lir	,	_				
SOUTH S	$C \Delta$. 9	4080												X	Form	filed by One	e Repo	orting Perso	n
FRANCIS	SCO SI														Form Perso	filed by Mor	re thar	n One Repo	rting	
(City)	(Sta	ate) (Z	Zip)																	
		Tab	le I - Nor	า-Deriv	ative	Se	curitie	s Acq	uired,	Dis	posed o	f, o	r Bene	eficia	lly O	wne	d			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Day/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (D 5)				d S	Securities F Beneficially (Owned Following (Form (D) o	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount		(A) or (D)	Price	1		ported Insaction(s) str. 3 and 4)			(Instr. 4)	
Ordinary Shares 11/2			11/20	0/2019				F		2,692 D S		\$17	.6 231,276			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 of Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year)			4. Transaction Code (Instr. 8)		of E		Expiratio	5. Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr.				ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	/ [C	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Titl	or Nu of	mber ares						

Explanation of Responses:

Brett K Haumann

11/22/2019

** 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.