FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

CTATEMENIT	OF CHANCE	S IN BENEFICIA	OWNEDSHID
STATEMENT	OF CHANGE	S IN BENEFICIA	L OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

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* GALA RENEE D						2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]										all app	licable)		Person(s) to Issuer 10% Owner Other (specify			
(Last) (First) (Middle) C/O THERAVANCE BIOPHARMA US, INC. 901 GATEWAY BLVD						3. Date of Earliest Transaction (Month/Day/Year) 02/12/2018										SVP, Chief Financial Officer						
(Street) SOUTH SAN FRANCISCO CA 94080 (City) (State) (Zip)					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							
		Tabl	e I - Nor	-Deriv	ative	Se	curitie	s Acc	quired,	Disp	osed o	f, or	Bene	eficia	ally (Owne	ed					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Date,		Code (Transaction Disposed Code (Instr. 5)			ities Acquired (A) d Of (D) (Instr. 3, 4			Securi Benefi	cially I Following	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	•	Transaction(s) (Instr. 3 and 4)				(
Ordinary Shares 02/12					2/2018						9,000		A	\$0		216,794		D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
Derivative Conversion Date Execution or Exercise (Month/Day/Year) if any			3A. Deems Execution if any (Month/Da	n Date, Code (Inst ay/Year)		Instr.	of		Expiration	Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount	t		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	e V (A) (D) E		Exercisal	xercisable D		Title Share		res									

Explanation of Responses:

Brett A. Grimaud as Attorneyin-Fact

02/14/2018

** 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.