SEC Form 4		
	_	_

Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

	10VAL
OMB Number:	3235-0287
Estimated average b	urden
hours per response:	0.5

Ī

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				2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Winningham Rick E</u>			-	<u>Inclustance Blo</u> p	<u>, 11411114, 11</u>		X	Director	10%	Owner			
(Last)	(First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/15/2024				Officer (give title below)	e Othe belo	er (specify w)			
C/O THERAVA	C/O THERAVANCE BIOPHARMA US, INC.			5/15/2024				CHIEF EXEC	UTIVE OFF	CER			
901 GATEWAY BOULEVARD			4	. If Amendment, Date c	of Original File	d (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)							X	Form filed by O	ne Reporting Po	erson			
SOUTH SAN FRANCISCO CA 94080							Form filed by More than One Reporting Person						
			F	Rule 10b5-1(c) Transaction Indication									
(City)	(State)	(Zip)	[Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									
	Та	ble I - No	on-Derivativ	ve Securities Acc	uired, Dis	posed of, or Benet	icially	Owned					
Date			2. Transaction Date (Month/Day/Xo	Execution Date,	3. Transaction	4. Securities Acquired (A) Disposed Of (D) (Instr. 3,	4 and	5. Amount of Securities Bonoficially	6. Ownership Form: Direct	7. Nature of Indirect Bonoficial			

	(Month/Day/Year)	if any (Month/Day/Year)	Code (Instr. 8)		5)			Beneficially Owned Following Reported	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
		C	Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Ordinary Shares	05/15/2024		A ⁽¹⁾		2,068	A	\$9.85	1,852,641	D	
Ordinary Shares								3,900	Ι	As Custodian
Ordinary Shares								92,567	Ι	By Trust
	Table II - Derivative Se	ecurities Acqu					•	Owned	•	L.

Table II - I Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			(e.y., pr	115, 66	ans, v	varia	ants,	options, c	Jonvenub	ie se	cunities)					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)			action (Instr.	of I		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		Expiration Date (Month/Day/Year) irred r osed) r. 3, 4		ration Date Amount of		8. Price of Derivative Security (Instr. 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 Exercisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. Reflects an acquisition from the Issuer pursuant to a restricted share purchase agreement under the Issuer's Amended and Restated 2013 Equity Incentive Plan at a per-share price equal to the closing per-share price of the Issuer's ordinary shares on the Nasdaq Global Market on May 15, 2024. Transaction was with the Issuer and did not involve an open market transaction.

/s/ Brett A. Grimaud,	05/17/2024
Attorney-in-Fact	05/17/2024

** 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.