Instruction 1(b).

FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

XIIIE⊙ <i>F</i>	AND EXCHANGE COMMISSIN
\	D C 00540

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative

Check this box if no longer subject 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

	e conditions of ee Instruction 1																			
Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Winningham Rick E					1110	Theravance Biopharma, Inc. [ TBPH ]								V		,		10% C	Owner	
					_									V	Office below	er (give title	Э	Other below	(specify	
(Last) (First) (Middle) C/O THERAVANCE BIOPHARMA US, INC.						3. Date of Earliest Transaction (Month/Day/Year)								CHIEF EXECUTIVE OFFICER						
901 GATEWAY BOULEVARD					11,1	11/1/2021														
- ONLOWING BOOLEVIRD					4 15															
(Street)					4. If A	If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
SOUTH FRANCI	$C\Delta$	A 9	4080											Form filed by One Reporting Person						
														Form filed by More than One Reporting Person						
(City)	(Sta	ate) (2	Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transacti					ion	on 2A. Deemed Execution Date,			3. 4. Securities Acquired (A) Transaction Disposed Of (D) (Instr. 3,						6. Ownership Form: Direct		7. Nature of			
Date (Month/Day/								Code (Instr.   5)			Beneficially Owned Following		ally	(D) or Indirect (I) (Instr. 4)		Beneficial Ownership				
								,	Code	v	Amount	(A) or	r Pric	e e	Reporte Transac				(Instr. 4)	
Ordinary Shares 11/14/20				.024				<b>A</b> <sup>(1)</sup>		3,193	A	\$9	0.57	1,827,092		D				
											$\vdash$	$\top$			200		,	As		
Ordinary Shares															3,	900		I	Custodian	
Ordinary Shares														92,567			I	By Trust		
		Tal	ble II -								osed of,				Owne	d				
		1			-	alls, v		-			convertib	1		÷						
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Yea			Execution Date, if any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Da (Month/Day/Y		ate Amoun		nt of ities lying ative ity (Inst	Di Se (Ii	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	Beneficial Ownership (Instr. 4)	
						Code V (A) (D)		Date Exerci	sable	Expiration Date	Title	Amour or Number of Shares	er							

## **Explanation of Responses:**

1. This transaction is being reported late due to inadvertent administrative error. 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 November 14, 2024. Transaction was with the Issuer and did not involve an open market transaction.

> /s/ Brett A. Grimaud, Attorney-in-Fact

11/19/2024

Date

\*\* Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.