FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| н |                          |     |  |  |  |  |  |  |  |  |  |
|---|--------------------------|-----|--|--|--|--|--|--|--|--|--|
|   | OMB APPROVAL             |     |  |  |  |  |  |  |  |  |  |
| ı |                          |     |  |  |  |  |  |  |  |  |  |
| l | OMB Number: 3235-02      |     |  |  |  |  |  |  |  |  |  |
| l | Estimated average burden |     |  |  |  |  |  |  |  |  |  |
| l | 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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 a  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Theravance Biopharma, Inc. [ TBPH ] |   |   |           |   |   |   |      |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify) |  |  |                 |   |  |   |  |   |   |
|--|--|---|---|-----------|---|---|---|------|---|--|--|--|-----------------|---|--|---|--|---|---|
| (Last)   | (Fii   | 3. Date of Earliest Transaction (Month/Day/Year) 06/14/2023 |   |           |   |   |   |      |   |  | X Officer (give title Other (specify below)  SVP, RESEARCH & DEVELOPMENT |  |                 |   |  |   |  |   |   |
| 901 GAT  | 4. If Amendment, Date of Original Filed (Month/Day/Year)                               |   |   |           |   |   |   | Line | 6. Individual or Joint/Group Filing (Check Applicable Line) |  |  |  |                 |   |  |   |  |   |   |
| ı  | Street) SOUTH SAN FRANCISCO CA 94080   |   |   |           |   |   |   |      |   |  |  |  |                 | X Form filed by One Reporting Person Form filed by More than One Reporting Person |  |   |  |   |   |
| (City)   | r) (State) (Zip)   |   |   |           |   | Rule 10b5-1(c) Transaction Indication  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. |   |      |   |  |  |  |                 |   |  |   |  | ended to  |   |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |  |   |   |           |   |   |   |      |   |  |  |  |                 |   |  |   |  |   |   |
| Date   |  |   |   |           | Date Execu<br>(Month/Day/Year) if any   |   | Deemed<br>cution Date,<br>ry<br>nth/Day/Year) |      | Transaction Disposed Code (Instr. 5)                        |  |  | ies Acquired (A<br>Of (D) (Instr. 3,   |                 |   |  | cially<br>I   | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|  |  |   |   |           |   |   |   |      | Code  | v  | Amount   | (A<br>(D   | A) or<br>D)     | Price   |  | ted<br>action(s)<br>3 and 4)  |  |   |   |
| Ordinary   | Shares   | 06/14/20  | .023  |           |   |   | S   |      | 2,322(1)  |  | D  | \$10.6   | 9 35            | 354,390   |  | D   |  |   |   |
|  |  | Tab   | le II -   | Derivativ |   |   |   |      |   |  |  |  |                 |   |  | ed  |  |   |   |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                              | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security                  | 3. Transaction<br>Date<br>(Month/Day/Year)                  | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |           | 4.<br>Transaction<br>Code (Instr.<br>8) |   |   |      | 6. Date Exercis<br>Expiration Date<br>(Month/Day/Yea        |  | ite  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security<br>(Instr. 3 and |                 | id 4)   | 3. Price of<br>Derivative<br>Security<br>Instr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | y [0   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4)                             |
|  |  |   |   |           | Code                                    | v   | (A)   | (D)  | Date<br>Exercisa  | able   | Expiration<br>Date   | Title  | or<br>Nur<br>of | ount<br>nber<br>ires  |  |   |  |   |   |

## Explanation of Responses:

1. This transaction was executed in accordance with the reporting person's 10b5-1 plan dated 11/23/22.

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

06/16/2023

\*\* Signature of Reporting Person Date

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.