FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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)

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

Name and Address of Reporting Person* Grant Jeremy T						2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
						THE TOTAL PROPERTY OF THE PROP								X	Directo	r	10% Ow		vner		
(Last) (First) (Middle)							of Earliest 2023	Trans	action (Mo	onth/E	Day/Year)			Officer below)	(give title		Other (s below)	specify			
C/O THERAVANCE BIOPHARMA US, INC. 901 GATEWAY BLVD					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)					-								X Form filed by One Reporting Person Form filed by More than One Reporting Person								
	UTH SAN ANCISCO CA 94080				Rı	Rule 10b5-1(c) Transaction Indication															
(City)	(S	tate)	(Zip)			Check this box to indicate that a transaction was made pursuant to a satisfy the affirmative defense conditions of Rule 10b5-1(c). See Inst															
		Tab	le I - Nor	ı-Deriv	vative	e Se	curities	s Ac	quired,	Dis	posed o	f, or B	enefici	ally	Owned						
Date				2. Trans Date (Month/			2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction D Code (Instr. 5)			. Securities Acquired (A) Disposed Of (D) (Instr. 3,)			4 and Securitie Beneficia Owned F		Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) (D)	or Pric	e	Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)					
Ordinary Shares 12/2					1/202	/2023		A		8,826	8,826 A		6 <mark>0</mark>	8,826		D					
Ordinary Shares 12/21					1/202	3			Α		2,942	2 A	. \$	\$0 11,768			D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any				4. Transa Code (I 8)		of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price o Derivative Security (Instr. 5)		9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e Oriss Fo	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amou or Numb of Share	er							
Share Option (Right to Buy)	\$11.33	12/21/2023			A		19,734		(1)	1	2/21/2033	Ordinary Shares	19,73	34	\$0	19,73	4	D			
Share Option (Right to Buy)	\$11.33	12/21/2023			A		6,578		(2)	1	2/21/2033	Ordinary Shares	6,57	8	\$0	6,578	3	D			

Explanation of Responses:

- 1. The option vests monthly over 24 months of service from the date of grant.
- 2. This option shall vest monthly over four months of service from the date of grant and will vest in full upon earlier of the four-month anniversary of Jeremy Grant's appointment to the Board or the date of Company's 2024 annual meeting of Shareholders.

/s/ Brett A. Grimaud, Attorney-12/26/2023 in-Fact

** 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.