FORM 4

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

		00540
Vashington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 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

1. Name and Address of Reporting Person*  Shafer Bradford J  (Last) (First) (Middle)  C/O THERAVANCE BIOPHARMA US, INC. 901 GATEWAY BOULEVARD						Suer Name and Ticker or Trading Symbol     Theravance Biopharma, Inc. [ TBPH ]      3. Date of Earliest Transaction (Month/Day/Year)     02/20/2021									ck all appl Direct Office below	tor r (give title		10% Ov Other (s below)	vner specify	
(Street) SOUTH FRANCI	SCO CA		4080 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Inc Line)	Form	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day					tion	ion 2A. Deemed Execution Da		I Date,	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)		A) or , 4 and	5. Amo Securit Benefic Owned Reporte	ount of fities For (D) (I) (I) (I) (II) (II)		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code V		Amount (A)		" P	rice	Transaction(s) (Instr. 3 and 4)					
Ordinary Shares 02/20/20					2021				F		31,869		\$	\$18. <b>7</b> 9	285,047			D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		ite	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		str.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code V		(A)	(D)	Date Exercis	able	Expiration Date	Title	or Num of Share	.						

**Explanation of Responses:** 

Brett A. Grimaud, Attorney-

in-Fact

02/23/2021

\*\* 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.