FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ashington	D.C.	20549	

OMB APPROVAL

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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

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1. Name and Address of Reporting Person* <u>Winningham Rick E</u>				2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
													X Dire	ctor	10% Owner		wner			
(Last)	(Fi	rst) (1	Middle)		2 Da	o of	Carlina	t Transa	ation (Ma	nath/D	0.4/\/0.0%			4	X Office below	er (give title w)		Other (below)	specify	
C/O THERAVANCE BIOPHARMA US, INC.					3. Date of Earliest Transaction (Month/Day/Year) 11/20/2019									Chief Executive Officer						
901 GATEWAY BOULEVARD																				
(Street)					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
SOUTH S FRANCIS	CI	Λ 9	4080												X For	n filed by One	ng Perso	n		
- TRANCIS															Form filed by More than One Reporting Person				rting	
(City)	(St	ate) (2	Zip)																	
		Tab	e I - Non	-Deriv	ative	Sec	uritie	s Acq	uired,	Disp	osed of	f, or	Bene	eficia	lly Own	ed				
Date			2. Transa Date (Month/D	Execution Date,		n Date,	3. Transaction Code (Instr. 8)					d Secu Bene	icially d Following	6. Owner Form: D (D) or Ir (I) (Instr	Direct ndirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount		A) or D)	Price	Trans	action(s) 3 and 4)			(msu. 4)		
Ordinary Shares 11/2				11/20	/2019		F		8,678		D	\$17	.6 1,	1,074,455)				
Ordinary Shares															92,567]	[By Trust		
		Tá	able II - D (e								sed of, o				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	tion Date, Transac Code (In					6. Date Exercisable and Expiration Date (Month/Day/Year)		•	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price of Derivative Security (Instr. 5)		Ow For Dire or I (I) (nership m: ect (D) ndirect Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code			Date Exercisa		Expiration Date			mber							

Explanation of Responses:

Rick E Winningham

11/22/2019

** Signature of Reporting Person

Date

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

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.

^{*} 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).