FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL

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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* HEGDE SHARATHCHANDRA S						2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]									Check a	all app			to Issue % Owne her (spe	ner
(Last) (First) (Middle) C/O THERAVANCE BIOPHARMA US, INC. 901 GATEWAY BOULEVARD			2.	3. Date of Earliest Transaction (Month/Day/Year) 05/20/2018										X Officer (give title Other (specify below) SVP, Research						
(Street) SOUTH FRANCI (City)	sco C.		94080 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person								
		Tabl	e I - No	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	eficia	ally C	Owne	ed			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				ay/Year) Execution		cution Date,		Transaction Disposed Code (Instr. 5)		ies Acquired (A) Of (D) (Instr. 3, 4		(A) or 3, 4 ar	l and Secu Bene Own		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	et of l ect Be Ow	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or D)	Price	- 1	Reported Transaction(s) (Instr. 3 and 4)			(111	150. 4)	
Ordinary Shares 05/				05/20	05/20/2018				F		19,103	3	D	\$24.31		174,258		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) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date Execution Date, if any (Month/Day/Year) (Month/Day/Year)				Date,	4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)					9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	hip of Be O) Ov ect (In	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisa		Expiration Date	Title	or Nur of	nber						

Explanation of Responses:

Sharathchandra S Hegde

05/22/2018

** 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.