FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: 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				2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]									Check a	all app	licable)	g Person(s) to Iss 10% O Other (s		wner		
(Last) (First) (Middle) C/O THERAVANCE BIOPHARMA US, INC. 901 GATEWAY BOULEVARD				3. Date of Earliest Transaction (Month/Day/Year) 02/20/2015									Λ	belov			below)			
(Street) SOUTH FRANCI (City)	sco C.		94080 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							. Individine)	lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tabl	e I - Noi	n-Deriv	ative	Sec	uritie	s Acc	uired,	Dis	posed o	f, o	r Ben	efici	ally O	wne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,		3. Transaction Code (Instr. 8) 4. Securiti Disposed 5)			ties Acquired (A) I Of (D) (Instr. 3, 4		(A) or 3, 4 aı	4 and Sec Bei Ow Rej		ecurities F eneficially (I		ership Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						\perp			Code	V	Amount		(A) 01 (D)	Price	(1		3 and 4)			
Ordinary Shares 02/20			02/20	/2015	/2015			F 674		674	D \$19.		.52	52 163,088			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			3A. Deemed Execution Date, if any (Month/Day/Year)		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)			8. Pric Deriva Securi (Instr.	vative urity ir. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nui of	ount nber ıres						

Explanation of Responses:

Bradford J. Shafer

02/24/2015

** Signature of Reporting Person

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.