FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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1. Name and Address of Reporting Person* GALA RENEE D						2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]								(Check all a		olicable) ctor	g Person(s) to Is	Owner
(Last) (First) (Middle) C/O THERAVANCE BIOPHARMA US, INC. 901 GATEWAY BLVD						3. Date of Earliest Transaction (Month/Day/Year) 08/14/2018								X	X Officer (give title below) Other (specify below) SVP, Chief Financial Officer			
Street) SOUTH SAN FRANCISCO (City) (State) (Zip)				4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yo				Execution Date,		·	3. 4. Securities		Acquired (A) or (D) (Instr. 3, 4 and		d 5) Secu		ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)	Price		Trans	action(s) 3 and 4)		(111341. 4)
Ordinary Shares 08/14/201			018	18			S		2,204	D	\$27.73	386(1)	2	12,588	D			
Ordinary Shares 08/15/201			018	18			S		39,839	D	\$26.70	083(2)	1	72,749	D			
Ordinary Shares 08/15/201			018	18			S		1,700	D	\$27.42	7.4254 ⁽³⁾		71,049	D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Security or Exercise (Month/Day/Year) if any		eemed Ition Date, h/Day/Year)	4. Transa Code (8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative rities ired osed . 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date		Amount of Der Securities Sec		Deriv Secu (Inst		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)			

Explanation of Responses:

- 1. This transaction was executed in multiple trades at prices from \$27.515 to \$28.05. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or any security holder of the issuer, full information regarding the number of shares and prices at which the transaction was effected.
- 2. This transaction was executed in multiple trades at prices from \$26.265 to \$27.20. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or any security holder of the issuer, full information regarding the number of shares and prices at which the transaction was effected.
- 3. This transaction was executed in multiple trades at prices from \$27.27 to \$27.70. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or any security holder of the issuer, full information regarding the number of shares and prices at which the transaction was effected.

Renee D. Gala

08/16/2018

** 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.