### FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

|  | Check this box if no longer subject to<br>Section 16. Form 4 or Form 5<br>obligations may continue. See<br>Instruction 1(b). |
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| OMB APPROVAL             |     |  |  |  |  |  |  |  |  |
|--------------------------|-----|--|--|--|--|--|--|--|--|
| OMB Number: 3235-028     |     |  |  |  |  |  |  |  |  |
| Estimated average burden |     |  |  |  |  |  |  |  |  |
| hours per response.      | 0.5 |  |  |  |  |  |  |  |  |

| 1. Name and Address of Reporting Person <sup>*</sup><br>WORBOYS PHILIP D<br>(Last) (First) (Middle)<br>C/O THERAVANCE BIOPHARMA US, INC.<br>901 GATEWAY BOULEVARD |               |                | 2. Issuer Name and Ticker or Trading Symbol <u>Theravance Biopharma, Inc.</u> [ TBPH ] 3. Date of Earliest Transaction (Month/Day/Year) 11/20/2018 |                        | tionship of Reporting Per<br>all applicable)<br>Director<br>Officer (give title<br>below)<br>SVP, Translation | 10% Owner<br>Other (specify<br>below) |
|---|---------------|----------------|--|------------------------|---|---------------------------------------|
| (Street)<br>SOUTH SAN<br>FRANCISCO<br>(City)  | CA<br>(State) | 94080<br>(Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year)   | 6. Indiv<br>Line)<br>X | ridual or Joint/Group Filin<br>Form filed by One Rep<br>Form filed by More tha<br>Person                      | orting Person                         |

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | if any | xecution Date, Transaction<br>any Code (Instr. |   | 4. Securities<br>Disposed Of<br>5) |               |         | Securities<br>Beneficially         | Form: Direct | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |
|---------------------------------|--|--------|--|---|------------------------------------|---------------|---------|------------------------------------|--------------|---|--|
|                                 |  |        | Code   | v | Amount                             | (A) or<br>(D) | Price   | Transaction(s)<br>(Instr. 3 and 4) |              | (Instr. 4)  |  |
| Ordinary Shares                 | 11/20/2018                                 |        | F  |   | 4,373                              | D             | \$24.79 | 162,380                            | D            |   |  |

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

|   |   |  | (* 37)  | ,                            |   |  |  |                     |                          |       |  |   |  |  |  |
|---|---|--|---|------------------------------|---|--|--|---------------------|--------------------------|-------|--|---|--|--|--|
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transa<br>Code (<br>8) |   | of<br>Deriv<br>Secu<br>Acqu<br>(A) or<br>Dispo<br>of (D) | verivative (Month/Day/Year)<br>iecurities<br>cquired<br>A) or<br>visposed<br>f (D)<br>nstr. 3, 4 |                     | xpiration Date Amount of |       |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|   |   |  |   | Code                         | v | (A)  | (D)  | Date<br>Exercisable | Expiration<br>Date       | Title | Amount<br>or<br>Number<br>of<br>Shares |   |  |  |  |

Explanation of Responses:

#### Brett A. Grimaud, Attorney-in-<u>11/21/2018</u>

Fact

\*\* 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.