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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB Number: Estimated average burden hours per response: 0.5

OMB APPROVAL

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* WORBOYS PHILIP D (Last) (First) (Middle)					2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]										Check a	ionship of Reportin all applicable) Director Officer (give title below)		10% O Other (below)		Owner (specify
C/O THERAVANCE BIOPHARMA US, INC. 901 GATEWAY BOULEVARD					3. Date of Earliest Transaction (Month/Day/Year) 02/06/2017											SV	/P, Transla	itional	l Science	!
(Street) SOUTH SAN FRANCISCO CA 94080 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)										Individ ine) X	Form	ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					-	Exec if an	A. Deemed xecution Date, any ⁄lonth/Day/Year)		Code	Transaction Dispose Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3,			4 and Secur Benef Owne Repor		cially I Following ed	Form:	nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	· V	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)						
Ordinary Shares 02/06/					2017				A		9,000)	A	\$	\$0 1		.84,332		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 (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Yo	Date, Transacti Code (Ins				ative ities red sed 3, 4	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)	Ov Fo Di or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	de V	((A)	(D)	Date Exercis	able	Expiration Date	Title	or Nun of Sha							

Explanation of Responses:

Brett A. Grimaud, Attorney-in-

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.