Edgar Filing: HAUMANN BRETT K - Form 4

HAUMANN	N BRETT K									
Form 4										
February 14	, 2018									
FORM	14								PPROVAL	
	UNITED S	TATES		ITIES A hington,			COMMISSION	OMB Number:	3235-0287	
Check th								Expires:	January 31,	
if no lon subject t	с. Г. А. Г. И.	STATEMENT OF CHANGES IN BENEFICIAL OWNERS					NERSHIP OF	Extimated average burden hours per response 0.5		
Section 1 Form 4 c	16.	SECURITIES								
Form 5	Filed purs	uant to S	Section 16	6(a) of the	e Securiti	es Exchang	ge Act of 1934,	reepeneen	0.0	
obligatio	$^{\rm ns}$ Section 17(a)						f 1935 or Sectio	n		
may con <i>See</i> Instr		30(h)	of the Inv	vestment	Company	Act of 19	40			
1(b).										
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> HAUMANN BRETT K			2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]			5. Relationship of Reporting Person(s) to Issuer				
										(Last)
(Last)	(Plist) (IV	iuuie)	(Month/D		ansaction		Director	100	6 Owner	
C/O THER	AVANCE BIOPH	ARMA	02/12/20	-			Diffector X Officer (give	e title Oth	er (specify	
	01 GATEWAY B		02/12/20	,10			below) SVP Clin I	below) Dev & Chief M	ed Ofc	
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check Applicable Line)				
			Filed(Month/Day/Year)							
							X Form filed by			
SOUTH SA							Form filed by M Person	More than One R	eporting	
FRANCISC	CO, CA 94080									
(City)	(State) (Zip)	Table	e I - Non-D	erivative S	ecurities Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction Date	2A. Dee	med	3.	4. Securit	ies	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)) Execution Date, if any (Month/Day/Year)		TransactionAcquired (A) or		Securities	Form: Direct	Indirect		
(Instr. 3)				Code (Instr. 8)	Disposed of (D) (Instr. 3, 4 and 5)		Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(monul)	Lay (I cai)	(11301.0)	(1150.5,	and 5)	Following	(Instr. 4)	(Instr. 4)	
						(A)	Reported			
						(A) or	Transaction(s)			
				$C \downarrow V$		(D) D .	(Instr. 3 and 4)			

Ordinary Shares 02/12/2018

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

А

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 control number.

D

150,496

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Code V Amount (D) Price

9,000 A

\$0

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Unde Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

**Signature of Reporting Person

Reporting Owner Name / Address		Relationships					
	Directo	r 10% Ow	vner Officer	Other			
HAUMANN BRETT K C/O THERAVANCE BIOPHARMA US, 901 GATEWAY BLVD SOUTH SAN FRANCISCO, CA 94080	INC.		SVP Clin Dev & Chief Med Ofc				
Signatures							
Brett A. Grimaud as	02/14/2018						

Attorney-in-Fact

Date

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.