Theravance Biopharma, Inc. Form 3/A June 12, 2014 FORM 3 UNITED

### M 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Title of (Instr. 4)

1. Name and Address of Reporting Person <u>*</u> ATIEH MICHAEL G	2. Date of Event Requiring Statement (Month/Day/Year) 06/03/2014	3. Issuer Name <b>and</b> Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]			
(Last) (First) (Middle)		4. Relationship of Reporting Person(s) to Issuer	Filed(Month/Day/Year)		
C/O THERAVANCE			06/05/2014		
BIOPHARMA US, INC., 901	(Check all applicable)				
GATEWAY BLVD					
			Owner		
(Street)		Officer Other	o. marriadar or sonia Group		
		(give title below) (specify belo	Filing(Check Applicable Line)		
SOUTH SAN FRANCISCO, CA 94080			_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State) (Zip)	Table I - Non-Derivative Securities Beneficially Owned				
1.Title of Security (Instr. 4)	2. Amount o Beneficially (Instr. 4)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		

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

SEC 1473 (7-02)

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

of Derivative Security	erivative Security 2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D)	

OMB APPROVAL OMB 3235-0104 Number: January 31, 2005 Estimated average

burden hours per response... 0.5

Shares or Indirect (I) (Instr. 5)

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships					
		Director	10% Owner	Officer	Other		
ATIEH MICHAEL G C/O THERAVANCE BIOPHARMA U 901 GATEWAY BLVD SOUTH SAN FRANCISCO, CA 94		ÂX	Â	Â	Â		
Signatures							
Brett A. Grimaud, Attorney-in-Fact	06/12/2014	1					
**Signature of Reporting Person	Date						

## **Explanation of Responses:**

#### No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

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### **Remarks:**

The amendment is being filed solely to add the Power of Attorney.

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.