Edgar Filing: THERAVANCE INC - Form 4

THERAVAN	NCE INC									
Form 4										
February 24,	, 2014									
FORM	14							OMB AF	PPROVAL	
	UNII	ED STATE		RITIES A shington,			COMMISSION	OMB Number:	3235-0287	
Check th								Expires:	January 31,	
if no long subject to		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF					Estimated average 2005			
Section 1		SECURITIES						burden hours per		
Form 4 o	or								0.5	
Form 5		•					ge Act of 1934,			
obligatio may cont				•	•	· ·	of 1935 or Section	ı		
See Instr		30(h) of the In	vestment	Compar	y Act of 19	940			
1(b).										
(Drint on Type 1	Deemenaac)									
(Print or Type I	Kesponses)									
Mammen Mathai Sym			2. Issue Symbol	2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer			
			THERA	VANCE	INC [TH	IRX]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	f Earliest Tr	ansaction		(Chech	k an appricable)	
			(Month/I				Director	10%	Owner	
•				2/20/2014			_X_Officer (give titleOther (specify			
GATEWAY	Y BLVD.						below) SVP. Resear	below) rch & Early Cl	in Dev	
	(Street)		4 TE A	u durant Da		1				
				mendment, Date Original Month/Day/Year)			6. Individual or Joint/Group Filing(Check			
			Filed(Mo	nn/Day/Year)		Applicable Line) _X_ Form filed by C	One Reporting Pe	rson	
SOUTH SA	N						Form filed by M	1 0		
	CO, CA 94080)					Person			
(City)	(State)	(Zip)	Tab	e I - Non-D	erivative	Securities Ac	equired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction	Date 2A. Dee	emed	3.	4. Securi	ties Acquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year) Execution Date, if			Transaction(A) or Disposed of (D)) Securities	Form: Direct	Indirect	
(Instr. 3)		any (Month	(Day/Vaar)	Code	(Instr. 3,	4 and 5)	2	(D) or Indirect (I)	Beneficial	
		(Nionin/	Day/Year)	(Instr. 8)			Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
							Reported	(111501. 1)	(11001. 1)	
						(A) or	Transaction(s)			
				Code V	Amount		(Instr. 3 and 4)			
Common	00/00/0014			Г	4 207	5	100.016	D		

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

02/20/2014

Stock

F

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

182,316

D

39.98

4,307 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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or		ate	7. Title Amoun Underly Securit (Instr. 3	nt of ying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo
				(A) or Disposed of (D) (Instr. 3, 4, and 5)						Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title I	Amount or Number of Shares		

Edgar Filing: THERAVANCE INC - Form 4

Reporting Owners

Relationships					
Director	10% Owner	Officer	Other		
		SVP, Research & Early Clin Dev			
	Director		Director 10% Owner Officer SVP,		

Signatures

Mathai	02/24/2014
Mammen	02/24/2014

**Signature of Reporting Person 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.