Edgar Filing: THERAVANCE INC - Form 4

THERAVAN	ICE INC									
Form 4										
May 27, 2014	4									
FORM	1								PPROVAL	
	4 UNITED S	TATES SECUE Was	RITIES A Shington,			NGE	COMMISSION	OMB Number:	3235-0287	
Check thi if no long	er STATEM	x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								
	Section 16. SECURITIES						Estimated average burden hours per response 0			
Form 5 obligation may conti <i>See</i> Instru 1(b).	inue. Section 17(a)	uant to Section 1) of the Public U 30(h) of the In	tility Hold	ing Com	pany	Act o	of 1935 or Section	·	0.0	
(Print or Type R	Responses)									
WALTRIP WILLIAM H Symbol			Issuer Name and Ticker or Trading abol ERAVANCE INC [THRX]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	(First) (Mi NCE, INC., 901 BOULEVARD	iddle) 3. Date of (Month/D 05/22/2	-	ansaction			X Director Officer (give below)	10%	6 Owner er (specify	
			endment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
SOUTH SAU FRANCISC	N O, CA 94080							More than One Ro		
(City)	(State) (Z	Zip) Tabl	e I - Non-D	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
(Instr. 3) any		Execution Date, if any	 3. 4. Securities f TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) 				SecuritiesFBeneficially(OwnedI	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
9			Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	05/22/2014		А	6,000	А	\$0	100,064	D		

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

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.

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

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

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number on f Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	vative Expiration Date es (Month/Day/Year) ed		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. H Der Sec (Ins
				Code V	(A) (D	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 28.54	05/22/2014		А	6,000	<u>(1)</u>	05/21/2024	Common Stock	6,000	

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
WALTRIP WILLIAM H THERAVANCE, INC. 901 GATEWAY BOULEVARD SOUTH SAN FRANCISCO, CA 94080	х						
Signatures							
Heather M. Shane, Attorney-in-Fact	05/27/2014						
**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).

This option may be exercised and shall be vested as to 1/12th of the shares subject to this option when optionee completes each
 (1) continuous month of service following the grant date and any then remaining unvested shares shall vest on the date of the next annual meeting of the Company's stockholders provided the optionee remains in continuous service on such date.

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.