## THERAVANCE INC Form 4

August 13, 2014

## FORM 4

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

OMB Number: 3235-0287

**OMB APPROVAL** 

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
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Form 4 or Form 5 obligations may continue. See Instruction

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

burden hours per response... 0.5

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Shafer Bradford J Issuer Symbol THERAVANCE INC [THRX] (Check all applicable) (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Director 10% Owner \_X\_\_ Officer (give title Other (specify THERAVANCE, INC., 951 08/11/2014 below) below) **GATEWAY BOULEVARD** Sr VP, Gen. Counsel, Secretary (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line)

SOUTH SAN FRANCISCO, CA 94080

(State)

(Zip)

(City)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Person

\_X\_ Form filed by One Reporting Person \_\_\_\_ Form filed by More than One Reporting

1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock	08/11/2014		M	33,667	A	\$ 14.53	474,430	D	
Common Stock	08/11/2014		S	27,108	D	\$ 22.12 (1)	447,322	D	
Common Stock	08/12/2014		S	1,048	D	\$ 22.3	446,274	D	
Common Stock							2,750	I	by child's trust (2)
							2,750	I	

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Common Stock			by child's trust (2)
Common Stock	2,750	I	by child's trust (2)

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

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(9-02)

#### 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)			5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 14.53	08/11/2014		M	33,667	(3)	02/09/2015	Common Stock	33,667

## **Reporting Owners**

Relationships Reporting Owner Name / Address Director 10% Owner Officer Other

Shafer Bradford J THERAVANCE, INC. 951 GATEWAY BOULEVARD SOUTH SAN FRANCISCO, CA 94080

Sr VP, Gen. Counsel, Secretary

## **Signatures**

Bradford J. 08/13/2014 Shafer

\*\*Signature of Date Reporting Person

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## **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 transaction was executed in multiple trades at prices from \$22.10 to \$22.16. The price reported above reflects the weighted average (1) sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or the security holder of the issuer, full information regarding the number of shares and prices at which the transaction was effected.
- (2) Shares held in trust for the benefit of a child of the reporting person. Reporting person is a trustee of the trust. Reporting person disclaims beneficial ownership of these shares.
- (3) Exercisable immediately.

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.