Edgar Filing: THERAVANCE INC - Form 4

THERAVAN	ICE INC											
Form 4												
August 22, 2	013											
FORM	ΙΔ							OMB AF	PPROVAL			
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check thi				0 /				Expires:	January 31,			
if no long subject to		EMENT O	F CHAN	GES IN BENEFICIAL OWNERSHIP O				•	2005			
	Section 16.				SECURITIES			Estimated a burden hou	0			
	Form 4 or							response	0.5			
Form 5 obligation	• · · · ·	•					ange Act of 1934,					
may cont	Section 1			•	•	• •	t of 1935 or Section	1				
See Instru	iction	30(h)) of the In	vestment	Compan	y Act of	1940					
1(b).												
(Print or Type F	(esponses)											
(
1. Name and A	ddress of Reporti	ing Person [*]	2. Issuer	suer Name and Ticker or Trading			5. Relationship of Reporting Person(s) to					
Aguiar Michael W Symbol			-			Issuer	Issuer					
							(Chaola all angliaghta)					
(Last)	(First)	(Middle)	3 Date of	Earliest Tra	ansaction		(Check	(Check all applicable)				
				Month/Day/Year)			Director	10%	Owner			
				3/20/2013				_X_Officer (give titleOther (specify				
GATEWAY	BOULEVAR	RD					below) Sr VP, Chi	below) lef Financial O	fficer			
(Street) 4. If Amer Filed(Mon				mendment, Date Original			,	, ,				
								6. Individual or Joint/Group Filing(Check Applicable Line)				
				itil/Day/Teal)			**	_X_ Form filed by One Reporting Person				
SOUTH SA	N						Form filed by M Person	lore than One Re	porting			
FRANCISC	O, CA 94080						i cisoli					
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Securities A	Acquired, Disposed of	, or Beneficial	ly Owned			
1.Title of	2. Transaction I	3. 4. Securities Acquired				6. Ownership	7. Nature of					
Security	(Month/Day/Ye		on Date, if Transaction(A) or Disposed of (D Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)				Form: Direct Indirect					
(Instr. 3)		any (Month/				Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership				
		(inonal)	, · 1 cur)	(Following	(Instr. 4)	(Instr. 4)			
						(A)	Reported					
			or			Transaction(s) (Instr. 3 and 4)						
				Code V	Amount	(D) Pri	ice (Insu: 5 and 4)					

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

F

Common

Stock

08/20/2013

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.

138,346

D

\$

35.89

4,570 D

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

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

Reporting Owners

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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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships							
i o			10% Owner	Officer	Other				
Aguiar Michael W THERAVANCE, INC. 901 GATEWAY BOULEVARD SOUTH SAN FRANCISCO, CA 94080				Sr VP, Chief Financial Officer					
Signatures	S								
Michael W. Aguiar	08/22/2013								
<u>**</u> 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.