Edgar Filing: THERAVANCE INC - Form 4

THERAVA	NCE INC								
Form 4									
February 24	, 2014								
FORM	ΙΔ						OMB AF	PROVAL	
	UNITE	ED STATES		RITIES AND EX shington, D.C. 24		COMMISSION	OMB Number:	3235-0287	
Check th				0 /			Expires:	January 31,	
if no long subject to	~ S ^ I ^ I	EMENT O	F CHAN	GES IN BENER	FICIAL OW	NERSHIP OF	•	2005	
Subject a Section 1		SECURITIES					Estimated average burden hours per		
Form 4 c	or							0.5	
Form 5	Filed	pursuant to	Section 1	6(a) of the Securi	ities Exchang	e Act of 1934,			
obligatio may con		17(a) of the	Public Ut	tility Holding Co	mpany Act of	f 1935 or Section	n		
See Instr		30(h)) of the In	vestment Compa	ny Act of 194	40			
1(b).									
(Print or Type]	Responses)								
1. Name and Address of Reporting Person [*] 2. Issuer			suer Name and Ticker or Trading		5. Relationship of Reporting Person(s) to				
BLUM LEO	ONARD M		Symbol		Issuer				
			-	VANCE INC [T	'HRX]				
(Last)	(First)	(Middle)		f Earliest Transaction	-	(Checl	k all applicable)	
(Last)	(11130)	(winduic)	(Month/D		I	Director	10%	Owner	
THERAVANCE, INC., 901 02/20/20 GATEWAY BOULEVARD			-	Officer (give title Other (specify					
			014	below) below)					
011120111	2002211					Sr VP, Cr	nief Comm. Of	ficer	
			Amendment, Date Original		6. Individual or Joint/Group Filing(Check				
			nth/Day/Year)		Applicable Line) _X_ Form filed by One Reporting Person				
COLUMN	N					_X_ Form filed by C Form filed by M			
SOUTH SA						Person		r8	
FRANCISC	CO, CA 94080								
(City)	(State)	(Zip)	Tabl	e I - Non-Derivative	e Securities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction				rities Acquired	5. Amount of	6. Ownership		
Security	(Month/Day/Ye		on Date, if	Transaction(A) or I		Securities	Form: Direct		
(Instr. 3)		any (Month/	Day/Year)	Code (Instr. 3 (Instr. 8)	, 4 and 5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(intentio	Luj/ I cul)	(111541.0)		Following	(Instr. 4)	(Instr. 4)	
					(A)	Reported			
					or	Transaction(s)			
				Code V Amoun		(Instr. 3 and 4)			

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

F

Common

Stock

02/20/2014

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.

286,783

D

\$

39.98

4,311 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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
BLUM LEONARD M			Sr VP,			
THERAVANCE, INC.			Chief			
901 GATEWAY BOULEVARD			Comm.			
SOUTH SAN FRANCISCO, CA 94080			Officer			
• •						

Signatures

Leonard M.	02/24/2014
Blum	02/24/2014

<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.

9. Nu

Deriv

Secu

Bene Own Follo Repo Trans (Instr