## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations 1/b)	STATE
Instruction 1(b).	

## MENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  WALTRIP WILLIAM H						2. Issuer Name and Ticker or Trading Symbol THERAVANCE INC [ THRX ]									elationship eck all appli X Directo	cable)	g Pers	son(s) to Iss 10% Ow	
	(Last) (First) (Middle) THERAVANCE, INC. 901 GATEWAY BOULEVARD					3. Date of Earliest Transaction (Month/Day/Year) 05/15/2012									Officer below)	(give title		Other (s below)	pecify
(Street) SOUTH FRANCI	SCO C.		94080 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	dividual or Joint/Group Filing (Check Applicable ) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - Non	-Deriv	ative	e Se	curitie	s Ac	quired,	Disp	osed o	of, or B	ene	ficial	y Owned	i			
1. Title of Security (Instr. 3)  2. Trans. Date (Month/I						ear)	2A. Deemed Execution Date, if any (Month/Day/Year		e, Transaction Dispose Code (Instr. 5)			rities Acquired (A) o ed Of (D) (Instr. 3, 4			Benefici	es Formula (D) Following (I)		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) (D)	or	Price	Transaction(s) (Instr. 3 and 4)				(111511.4)
Common Stock 05/1				05/15	5/2012		A		6,00	00 A		\$0	62	62,258		D			
		Т	able II - I						uired, D , option						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	4. Transa Code (1 8)		n of		6. Date Exe Expiration (Month/Da		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	es ally g d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisabl		xpiration ate	Title	or Nu of	nount mber ares					
Stock Option (Right to	\$21.62	05/15/2012			A		6,000		(1)	05	5/14/2022	Commo Stock	<sup>1</sup> 6,	,000	\$0	6,000		D	

## **Explanation of Responses:**

1. This option may be exercised and shall be vested as to 1/12th of the shares subject to this option when optionee completes each continuous month of service following the grant date.

Heather M. Shane as Attorney- 05/17/2012 in-Fact

\*\* Signature of Reporting Person

Date

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

- \* 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.

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 Number.