FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

20549	OMB AP	OMB APPROVAL						
ENEELCIAL OWNEDSHID	OMB Number:	3235-0287						

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

	Check this box if no longer subject to
$\neg$	Section 16. Form 4 or Form 5
_	obligations may continue. See
	Instruction 1(b).

							. ,													
1. Name and Address of Reporting Person*  Aguiar Michael W					2. Issuer Name and Ticker or Trading Symbol THERAVANCE INC [ THRX ]								5 (0	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Aguiai	Michael	<u>vv</u>									J				X	Direc	ctor		10% O	wner
(Last)	(Fii	rst) (	Middle)		0.5		·				(D. 04.)			4	X	Office	er (give title w)		Other (below)	specify
, ,	THERAVANCE, INC.			3. Date of Earliest Transaction (Month/Day/Year) 06/02/2015									President & CEO							
951 GAT	EWAY BO	ULEVARD																		
(Street)					4. If	Amer	ndment	, Date c	of Origina	l Filed	d (Month/Da	ay/Ye	ear)		. Indiv	dual o	r Joint/Group	Filing (C	heck A	pplicable
SOUTH S	<i>C</i> 2	<b>A</b> 9	94080												X	Form	n filed by One	e Reportir	ng Pers	on
FRANCI																Form Pers	n filed by Mor on	e than O	ne Rep	orting
(City)	(St	ate) (	Zip)																	
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Ac	quired,	, Dis	posed o	f, o	r Ben	efici	ally (	Owne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execution Date		Date,	Transaction Disposed C			ties Acquired (A) I Of (D) (Instr. 3, 4			l and 5) Secu Bene Owne		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price			ted action(s) 3 and 4)			(Instr. 4)
Common Stock 06/02/2				2015		F		24,698 <sup>(1)</sup> D		\$16	432,653		32,653	D						
		Та									osed of, onvertib				y Ov	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Date Execution		n Date, Transact				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				vative urity ir. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: ct (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Codo	v	(A)	(n)	Date Evereisa		Expiration	Tiel	or Nur of	nber						

## **Explanation of Responses:**

1. These shares were withheld by the Issuer to satisfy income tax withholding obligations associated with a performance stock award that vests based on the achievement of certain performance conditions over a six-year time-frame from 2011 through December 31, 2016 and continued employment.

<u>/s/ Michael W. Aguiar</u> <u>06/04/2015</u>

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.