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 may continue. See	
Instruction 1(b).	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 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*  Winningham Rick E						2. Issuer Name and Ticker or Trading Symbol THERAVANCE INC [ THRX ]							(Che	ck all applica	•		vner	
(Last) (First) (Middle) THERAVANCE, INC. 901 GATEWAY BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 04/30/2013								X Officer (give title other (specify below)  Chief Executive Officer				
(Street) SOUTH SAN FRANCISCO CA 94080				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	) X Form fil Form fil	dual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	(5	State)	(Zip)									<del>.</del> _	<i>e</i> :					
		Ia	bie i - No	n-Dei	rıvatı	ve S	ecur	ities Ac	quired	I, DI	sposed o	of, or Be	neficially	/ Owned				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					y/Year) Execution Date		xecution Date,				4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a		5. Amour Securitie Beneficia Owned F Reported	s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price	Transact	Transaction(s) (Instr. 3 and 4)			(111341.4)
Common Stock 04/30/2					30/201	2013		M		385,16	385,161 A \$9		5 977	977,083		D		
Common Stock 04/30/2				30/201	2013			S <sup>(1)</sup>		253,955 D		\$33.64	<sup>2)</sup> 723	723,128		D		
Common Stock 04/30/2				30/201	/2013			S <sup>(1)</sup>		1,577	1,577 D \$3		721,551		D			
			Table II								oosed of converti			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 if any (Month/Day	Date,		Transaction Code (Instr.		n Derivative		Exerci on Da Day/Y		7. Title an of Securit Underlyin Derivative (Instr. 3 ai	ies g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)			
Stock Option (Right to	\$9.6875	04/30/2013			M			385,161	(4)		03/28/2014	Common Stock	385,161	\$0	0		D	

## **Explanation of Responses:**

- 1. DISPOSITIONS MADE PURSUANT TO A PLAN INTENDED TO COMPLY WITH RULE 10b5-1(c).
- 2. This transaction was executed in multiple trades at prices ranging from \$33.29 to \$34.28. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer, full information regarding the number of shares and prices at which the transaction was effected.
- 3. This transaction was executed in multiple trades at prices ranging from \$34.30 to \$34.36. The price reported above reflects the weighted average sale price.
- 4. Immediately exercisable.

Heather M. Shane as Attorneyin-Fact

05/02/2013

\*\* 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.