FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	Check this box if no longer subject to	STATEMENT OF				
\Box	Section 16. Form 4 or Form 5 obligations may continue. See					
$\overline{}$		=1				
	Instruction 1(b).	Filed pursuant to				

CHANGES IN BENEFICIAL OWNERSHIP

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

Instruct	tion 1(b).		F		nt to Section 16(a) ction 30(h) of the I						34		lioura	рег гезропзе.	0.5	
1. Name and Address of Reporting Person* <u>Winningham Rick E</u>					2. Issuer Name and Ticker or Trading Symbol THERAVANCE INC [THRX]							S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
	ast) (First) (Middle) HERAVANCE, INC. 01 GATEWAY BOULEVARD				3. Date of Earliest Transaction (Month/Day/Year) 08/20/2013							X Officer (give title Other (specify below) Chief Executive Officer				
(Street) SOUTH SAN FRANCISCO CA 94080				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St		Zip) e I - Non-Der	ivative S	Securities Acc	nuired	Dis	nosed o	of c	or Ben	eficia	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transa Date					2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3)				(A) or	5. Am Secur Benet Owne Repor	ount of ities icially d Following rted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Amount	(D)		Price		action(s) 3 and 4)			
Common Stock 08/20/				20/2013		F		10,040	10,046 D S		\$35	.89 7	12,459	D		
		Та			curities Acqu lls, warrants,							y Owned				
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. Transacti Code (Ins 8)		6. Date E Expiration (Month/E	on Dat		An Se Un De Se	Title and mount of ecurities nderlying erivative ecurity (Ind 4)	ıstr. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Date Exercisable

Explanation of Responses:

Heather M. Shane as Attorney-08/22/2013

Amount or Number

of Shares

in-Fact

Title

Expiration Date

** 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).

Code

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.

(A) (D)