FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C.

washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-02		
	Fotimated average burden			

287 Estimated average burden hours per response: 0.5

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

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* WHITESIDES GEORGE M					2. Issuer Name and Ticker or Trading Symbol THERAVANCE INC [THRX]											ionship of Reporting all applicable) Director		10% Ow		wner
` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '				3. Date of Earliest Transaction (Month/Day/Year) 12/22/2010										belov	cer (give title ow)		Other (below)	(specify		
(Street) SOUTH SAN FRANCISCO CA 94080 (City) (State) (Zip)				4. If a	4. If Amendment, Date of Original Filed (Month/Day/Year)									3. Indivi Line) X	-7					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transar Date (Month/Da					r) I	2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Dispose Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3,			4 and Sec Ben Owi		amount of curities neficially ned Following		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	Amount (A) or (D)		Pric	.	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 12/2.			12/22	/2010	2010		J ⁽¹⁾		1,152	1,152 A		\$	SO 0	556,571			D			
Common Stock													170,318			I	By family trust			
	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)	vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any		1. Fransaction Code (Instr. 3)		n of l		Expirati	5. Date Exercisable and Expiration Date Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deriv Secu	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nu of	ount mber ares						

Explanation of Responses:

1. Represents pro rata distribution from Sierra Ventures VI, L.P.

Heather M Shane as Attorneyin-Fact

12/27/2010

** 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.