FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burde	en							
hours per response:	0.5							

5. Relationship of Reporting Person(s) to Issuer

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

1. Name and Address of Reporting Person'

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

2. Issuer Name and Ticker or Trading Symbol

FRIEDMAN CATHY						THERAVANCE INC [THRX]									able)	10%	Owner
	(F VANCE, IN TEWAY BL				3. Date of Earliest Transaction (Month/Day/Year) 06/02/2014								Officer below)	(give title	Othe belov	r (specify v)	
	Street) SOUTH SAN FRANCISCO CA 94080					4. If Amendment, Date of Original Filed (Month/Day/Year) 06/04/2014								ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(S	tate)	(Zip)														
		Ta	ble I - No	n-Deri	ivativ	ve Se	ecurities	Ac	quired,	Dis	posed o	f, or Be	neficiall	y Owned			
Date					nsactio h/Day/\		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispo		Disposed	urities Acquired (A) or sed Of (D) (Instr. 3, 4 ar		5. Amour Securitie Beneficia Owned F	s Illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) (D)	Price	Transact	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock 06/02							/2014				7,585 ⁽¹⁾ A		\$0	7,5	7,585 ⁽¹⁾		
Common Stock 06/02/						/2014			A		7,585 ⁽¹⁾ A		\$0	15,1	15,170(1)		
			Table II -								osed of, onvertil			Owned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date E (Month/Day/Year) if	3A. Deemed Execution Date, if any (Month/Day/Year)	ate,	4. Transaction Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Yea		of Securities		ties ng e Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio	Owners Form: Direct (I or Indire (I) (Instr	Beneficial Ownership ect (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal:		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	m(s)	
Stock Option (Right to Buy)	\$23.0786	06/02/2014			A		7,585 ⁽¹⁾		(2)	C	06/01/2024	Common Stock	7,585(1)	\$0	7,585 ⁽¹) D	
Stock Option (Right to	\$23.0786	06/02/2014			A		7,585 ⁽¹⁾		(3)	C	06/01/2024	Common Stock	7,585(1)	\$0	7,585 ⁽¹) D	

Explanation of Responses:

- 1. The number of shares was adjusted by a factor to account for the effect of the spin-off of Theravance Biopharma, Inc. from Theravance, Inc. The factor was based on the 3-day post-spin volume weighted average price of Theravance, Inc, and Theravance Biopharma, Inc. and the stock dividend of one ordinary share of Theravance Biopharma, Inc. for every 3.5 shares of Theravance, Inc. common stock received by Theravance, Inc. stockholders as of the record date for the spin-off.
- 2. This option may be exercised and shall be vested as to 1/24th of the shares subject to this option when optionee completes each continuous month of service following the grant date.
- 3. 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 and any then remaining unvested shares shall vest on the date of the next annual meeting of the Company's stockholders provided the optionee remains in continuous service on such date.

<u>Heather M. Shane, Attorney-in-</u> <u>Fact</u>

** Signature of Reporting Person

06/09/2014

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.