FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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* <u>Mammen Mathai</u>					2. Issuer Name and Ticker or Trading Symbol THERAVANCE INC [THRX]										Check	all app	o of Reportin blicable) stor er (give title	g Person	10% O	
(Last) (First) (Middle) THERAVANCE, INC. 901 GATEWAY BLVD.					3. Date of Earliest Transaction (Month/Day/Year) 11/20/2011										X	belov			below)	
(Street) SOUTH SAN FRANCISCO CA 94080 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)									Indivine)	Form Form	or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Day/Year) Ex		A. Deemed xecution Date, any Month/Day/Year)		Code	Transaction D Code (Instr. 5		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)				Securi Benefi Owned	Securities F Beneficially (6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount		(A) or (D)	Price		Transa	ection(s) 3 and 4)			(Instr. 4)
Common Stock 11/20/2					/2011						2,250		D	\$22.34		245,864		D		
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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, Transact					6. Date E Expirati (Month/I	on Dat		e and 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3				Own Form Direct or In (I) (Ir	ership n: ct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nur of	ount nber ires						

Explanation of Responses:

Mathai Mammen

11/22/2011

** 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.