Edgar Filing: Smaldone Alsup Laurie - Form 4

Smaldone Ala	sup Laurie										
Form 4											
May 02, 2019)										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									MB APPROVAL		
. •	• UNITEI	D STATES					NGE (COMMISSION	ONID	3235-0287	
Check this	Check this box Washington, D.C. 20549						Number:				
if no long	. *					CTA			Expires:	January 31, 2005	
subject to STATEMENT OF CHAN				GES IN BENEFICIAL OW				NERSHIP OF	Estimated a		
Section 16 Form 4 or		SECURITIES						burden hours per response 0.5			
Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,									
obligation	^s Section 1'						-	f 1935 or Sectio	'n		
may conti	nue.			vestment (•	- ·			11		
See Instru 1(b).	ction	20(11)	or the m	· countent ·	compun.	, 1100	. 01 17				
1(0).											
(Print or Type R	esponses)										
1. Name and Address of Reporting Person [*] _ 2. Issuer Name and Ticker or				Ticker or 7				Reporting Person(s) to			
Smaldone Alsup Laurie			Symbol					Issuer			
			Therava	nce Bioph	harma, Ir	nc. [T	BPH]	(Chec	ck all applicable	e)	
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	insaction			(0.00	in an approach	•)	
			(Month/Da	ay/Year)				_X_ Director		6 Owner	
	VANCE BIOI		04/30/20)19				Officer (give below)	title Oth below)	er (specify	
US, INC, 90	1 GATEWAY	BLVD.						001011)	001011)		
	(Street)		4. If Amer	. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed			Filed(Mon	iled(Month/Day/Year)				Applicable Line)			
								X Form filed by	One Reporting Pe More than One Re		
SOUTH SAI								Person		porting	
FRANCISCO	J, CA 94080										
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction D	Date 2A Deer	med	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea	n Date, if TransactionAcquired (A) or					Securities	Form: Direct	Indirect		
(Instr. 3)		any	CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					Beneficially		Beneficial	
		(Month/I						Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
								Reported	(IIIsu: +)	(1130.4)	
						(A)		Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Ordinary	04/20/2010							10.247	D		
Shares	04/30/2019			А	8,385	А	\$0	18,347	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 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. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	of Derivative Expiration D Securities (Month/Day/ Acquired (A) or Disposed of (D) (Instr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. F Der Sec (Ins
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Share Option (Right to Buy)	\$ 23.85	04/30/2019		А	6,000	<u>(1)</u>	04/29/2029	Ordinary Shares	6,000	

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Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Smaldone Alsup Laurie C/O THERAVANCE BIOPHARMA US 901 GATEWAY BLVD. SOUTH SAN FRANCISCO, CA 94080		Х				
Signatures						
Brett A. Grimaud, Attorney-in-Fact	05/02/20)19				
**Signature of Reporting Person	Date					

Explanation of Responses:

* 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).

This option may be exercised and shall be vested as to 1/12th of the shares subject to this option when optionee completes each

(1) 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 shareholders provided the optionee remains in continuous service on such date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.