Edgar Filing: Revance Therapeutics, Inc. - Form 4

Revance Th Form 4 August 20, 2	erapeutics, Inc. 2014										
Check this box									OMB Number:	3235-0287	
if no lon	iger STATI	STATEMENT OF CHANGES IN BENEFICIAL OWN						FRSHIPOF	Expires:	January 31, 2005	
subject t Section Form 4 (16.		RITIES	ICIA			Estimated a burden hou response				
Form 5 obligation may com <i>See</i> Instr 1(b).	Filed p ons Section 1	20(h) of the investment (comments A at at 1040)								0.0	
(Print or Type Responses)											
Waugh Jacob Symbol				er Name and Ticker or Trading ce Therapeutics, Inc. [RVNC]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)		of Earliest T		с. _[к	vitej	(Check	c all applicable	2)	
				/Day/Year)				Director 10% Owner X Officer (give title Other (specify below) below) Chief Scientific Officer			
(Street) 4. If Ame			nendment, Date Original			6. Individual or Joint/Group Filing(Check					
Filed(Mo				Ionth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
NEWARK	, CA 94560							Form filed by M Person			
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secur	ities Acqu	ired, Disposed of,	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Execution any		Code	4. Securit ord Dispos (Instr. 3, 4	ed of ((D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D)	Price \$	(Instr. 3 and 4)			
Common Stock	08/18/2014			S	25,000	D	24.467 (1)	53,333	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)

D S	. Title of Derivative ecurity 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 (Instr. 8)	5. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
					Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships							
	Director	10% Owner	Officer	Other					
Waugh Jacob C/O REVANCE THERAPEUTICS, INC 7555 GATEWAY BOULEVARD NEWARK, CA 94560	2.		Chief Scientific Officer						
Signatures									
/s/ Gordon Ho, Attorney-in-fact	/20/2014								

**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).
- The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from (1) \$24.230 to \$24.830, inclusive.

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.