Schilke Tobin Form 4 November 07, 2018

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

OMB APPROVAL

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Check this box

Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Schilke Tobin

(Last)

(First)

(Middle)

C/O REVANCE THERAPEUTICS,

INC, 7555 GATEWAY BLVD

(Street)

(State)

4. If Amendment, Date Original

Filed(Month/Day/Year)

3.

5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Issuer

Symbol

Revance Therapeutics, Inc. [RVNC]

3. Date of Earliest Transaction (Month/Day/Year)

11/05/2018

below)

6. Individual or Joint/Group Filing(Check

(Check all applicable)

CFO

below)

Applicable Line)

Director

X_ Officer (give title

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

NEWARK, CA 94560

(City)

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3)

any

(Zip)

(Month/Day/Year)

Transaction(A) or Disposed of Code (D) (Instr. 8)

(Instr. 3, 4 and 5)

Securities Beneficially Owned Following Reported

5. Amount of

(D) or Indirect (I) (Instr. 4)

D

6. Ownership 7. Nature of Form: Direct Indirect Beneficial Ownership (Instr. 4)

10% Owner

Other (specify

Transaction(s) (Instr. 3 and 4)

Amount (D) Price

(A)

4. Securities Acquired

Common 11/05/2018 Stock

Code V 18,000 A (1)

A \$0 18,000

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

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SEC 1474 (9-02)

number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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. Transaction Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Employee Stock Option (Right to Buy)	\$ 24.96	11/05/2018		A	100,000		(2)	11/04/2028	Common Stock	100,00

Reporting Owners

Reporting Owner Name / Address	Relationships					
Fg ,	Director	10% Owner	Officer	Other		
Schilke Tobin						
C/O REVANCE THERAPEUTICS, INC			CEO			
7555 GATEWAY BLVD			CFO			
NEWARK, CA 94560						

Signatures

/s/ Gordon Ho, Attorney-in-Fact

**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).
- (1) The shares subject to the Restricted Stock award shall vest in four (4) equal annual installments beginning from December 15, 2018, subject to Mr. Schilke's Continuous Service (as defined in the Issuer's 2014 Inducement Plan(the "Plan")) on each vesting date.
- The shares subject to the stock option shall vest over a period of four years commencing on November 5, 2018, with 25% vesting on the annual anniversary of the vesting commencement date and 1/48th vesting each month thereafter over the remaining three years, subject to Mr. Schilke's Continuous Service (as defined in the Plan) through each such vesting 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.

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