Edgar Filing: Vickers Philip J. - Form 4

Check this box if no longer subject to SECURITIES Section 16. SECURITIES									3235-0287 January 31, 2005 verage		
 (Print or Type Responses) 1. Name and Address of Reporting Person [*]_2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to 										on(s) to	
Vickers Philip J.			Symbol Revance	e Therape	utics, In	2. [R]	VNC]	Issuer			
(Last)	(First) ((Middle) 3. Date of Earliest Transaction				(Chec	k all applicable)			
			(Month/Day/Year) 03/16/2018					Officer (give title Other (specify below) below)			
				Amendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NEWARK, CA 94560											
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Executio any		3. Transactic Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common	03/16/2018			Code V P	Amount 2,250	(D) A	Price \$ 31.25	5,250	D		
Stock Common											
Stock	03/16/2018			Р	900	А	\$ 31.2	6,150	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.

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 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. Transacti Code (Instr. 8)	5. orNumber 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 Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships						
F	Director	10% Owner	Officer	Other				
Vickers Philip J. C/O REVANCE THERAPEUTICS, I 7555 GATEWAY BOULEVARD NEWARK, CA 94560	NC. X							
Signatures								
/s/ Gordon Ho, Attorney-in-Fact	03/16/2018							
**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).

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.