FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL											
	OMB Number:	3235-0287										
l	Estimated average burden											
l	hours per response:	0.5										

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*  RODDY PETER S						2. Issuer Name and Ticker or Trading Symbol PAIN THERAPEUTICS INC [ PTIE ]									ck all applica Director	able)	Person(s) to Iss 10% O		vner		
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 07/14/2014										below)	Officer (give title below)  chief Fiana		Other (s below) Officer	specify		
(Street)	Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)									Joint/Group Filing (Check Applicable					
(City) (State) (Zip)															X Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
		Та	ble I - Non	-Deriva	tive S	ecur	ities Ac	cqui	ired, I	Disp	osed c	of, or E	ene	ficially	Owned						
Date				Date	. Transaction Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				) Securitie Beneficia Owned F	neficially ned Following		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A (D	) or )	Price	Reported Transacti (Instr. 3 a	on(s)			(1130.4)		
Common	Stock			07/14/	2014	07	/14/2014	4	M		171,5	91	A	\$4.54	256	,143		D			
Common	Stock			07/14/	2014	07	/14/2014	4	F		153,0	50	D	\$5.09	103,093			D			
			Table II - [	Derivati e.g., pu											Owned						
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/Ye	Code (Instr		Derivative E			Date Exe piration onth/Day	Date	of Securities			curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Cod	e V	(A)	(D)	Dat Exe	te ercisabl		xpiration ate	Title	OI N	mount umber Shares		(Instr. 4)					
Common Stock	\$4.54	07/14/2014	07/14/2014	4 M			171,591	08/	/14/2004	4 0	7/14/2014	Commo	n 1	71,591	\$4.54	1,581,2	212	D			

**Explanation of Responses:** 

/s/ Peter S. Roddy

07/15/2014

\*\* Signature of Reporting Person Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).