FORM 4

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
---------------	------	-------

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
--	--

OMB APPRO	OVAL
OMB Number:	3235-0287
Estimated average burd	en
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* O DONNELL MICHAEL J					2. Issuer Name and Ticker or Trading Symbol PAIN THERAPEUTICS INC [PTIE]												nip of Reporting Person(s) to Is oplicable) ector 10% C			
(Last)	(Fii	rst) (3. Date of Earliest Transaction (Month/Day/Year) 03/11/2010									71		cer (give title		Other (specify below)			
(Street) (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indiv ine) X	Form	ual or Joint/Group Filing (Check Applicable 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																			
Date			2. Transac Date (Month/Da	Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispos			curities Acquired (A) osed Of (D) (Instr. 3, 4			l and 5) Secu Bene Own		cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A (D	(A) or (D) Price				action(s) 3 and 4)			(Instr. 4)
Common Stock 03/				03/11/	L/2010 0		03/11/2	2010	S		25,000	D \$6.		\$6.1	443	5,775		D		
	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) (Month/Day/Year) (Month/Day/Year) 3A. Deemed Execution Date, if any (Month/Day/Year) (Month/Day/Year) 8)		Transa Code (I		5. Nun of Deriv. Secul Acqu (A) or Dispo of (D) (Instrand 5	ative rities ired sed	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		nstr. 3 nount mber			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own For Dire or II (I) (I	nership m: ect (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

/s/Peter S. Roddy by Power of **Attorney**

03/12/2010

** Signature of Reporting Person

Date

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

- * 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.

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.