Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGE	ES IN BENEFICIAL	OWNERSHIP
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**OMB APPROVAL** OMB Number: Estimated average burden 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*  ROBERTSON SANFORD					2. Issuer Name <b>and</b> Ticker or Trading Symbol PAIN THERAPEUTICS INC [ PTIE ]								(Che	eck all applic Directo Officer	or (give title	Perso	10% Ow Other (s	ner	
(Last) (First) (Middle) FRANCISCO PARTNERS 2882 SAND HILL ROAD				3. Date of Earliest Transaction (Month/Day/Year) 05/19/2011									below)			below)			
SUITE 2	80				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) MENLO	PARK (	CA	94025											2	_	iled by One iled by More I		J	- 1
(City)	(	State)	(Zip)																
		Tal	ole I - Non-	-Deriva	tive	Se	curities	s Acc	quired, I	Dis	posed o	f, or B	ene	ficiall	y Owned				
1. Title of Security (Instr. 3)  2. Transar Date (Month/Date)				Execution I ay/Year) if any		ecution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired Disposed Of (D) (Instr. 5)				ies Form cially (D) ( Following (I) (I		Direct Indirect I	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	nt (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)
	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  (Instr. 3)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Y		Co	te, Transaction Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Co	ode	v	(A)		Date Exercisabl		Expiration Date	Title	OI N Of	umber					
Non- Qualifying Stock	\$9.14	05/19/2011	05/19/201	11	A		25,000		05/19/2012	2 0	05/19/2021	Common Stock	2	5,000	\$9.14	477,804		D	

## **Explanation of Responses:**

1. Stock options are cliff vested over a 4 year period at a rate of 25% of the shares each year on the anniversary date of the grant.

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

05/19/2011

\*\* Signature of Reporting Person

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.