SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

											1									
1. Name and Address of Reporting Person* GUSSIN ROBERT Z						2. Issuer Name and Ticker or Trading Symbol <u>PAIN THERAPEUTICS INC</u> [PTIE]								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
GUSSIN RUBERT Z													_ 3	X Director			10% Owner			
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/24/2016								Officer (give title below)			Other (specify below)			
		4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable									
(Street)														Line	,	iled by One	Repo	orting Perso	'n	
(City)	(S	tate)	(Zip)		-								-	iled by Mor	•	n One Repo				
		Tab	ole I - Nor	ו-Deri	vativ	e Se	curities	s Ac	quired,	Dis	posed o	of, or E	Bene	ficiall	y Owned					
Date							2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Dispose Code (Instr. 5)		urities Acquired (A) (sed Of (D) (Instr. 3, 4				es ally Following	Form (D) o	n: Direct r Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	V Amount (A) or (D)			Price	Transact	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	3. Transaction Date (Month/Day/Year)	Execution Date, if any		Date, Transa Code (nsaction of E		6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) Expiration Date (Month/Day/Year) Derivative Sec (Instr. 3 and 4)			ecurity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	s Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisat		Expiration Date	Title	oi N of	umber						
Non- Qualifying Stock Options (1)	\$2.03	06/24/2016	06/24/2016		A		15,000		07/24/201	16	06/24/2026	Comm Stocl		5,000	\$2.03	714,86	6	D		

Explanation of Responses:

Remarks:

(1) Non-Qualifying Stock Options issued pursuant to the Company's 2008 Equity Incentive Plan vest over four (4) year period at a rate of 1/48th per month.

/s/ Peter S. Roddy by Power of	00/20/2010
Attorney	<u>06/28/2016</u>

** 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.