FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>3</b> ,	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287		
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Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

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

					Ocone	311 00(11)	JI 1110	mivesament o	ompany Act	01 10-10						
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol PAIN THERAPEUTICS INC [ PTIE ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
ROBERTSON SANFORD			-	Time time to the time to the time to							X Directo	or	10% Ov	vner		
(Last) (First) (Middle) FRANCISCO PARTNERS 2882 SAND HILL					3. Date of Earliest Transaction (Month/Day/Year) 09/14/2012							Officer below)	(give title	Other (s below)	specify	
ROAD																
SUITE 280				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applic Line)							plicable				
(Street)												X Form f	iled by One Re	eporting Person	n	
MENLO	PARK C	<b>CA</b>	94025							Form filed by More than One Reporting Person			rting			
(City)	(5	State)	(Zip)													
		Tab	le I - Non-De	rivativ	e Sec	curities	s Ac	quired, Di	sposed o	f, or Be	neficiall	y Owned	l			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)			•	Day/Year) Execution Date, if any (Month/Day/Year) 8		ecution Date, Tra		ansaction Disposed Of (D) (Instr. 3, ode (Instr. 5)			Benefici	es Form ally (D) c Following (I) (II	orm: Direct ) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code V	Amount	Amount (A) or (D)		Transact (Instr. 3	tion(s)		(			
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	n Date e (Month/Day/Year) Exec if an (Mor	3A. Deemed Execution Date, if any (Month/Day/Year	4. Transa Code 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Non- Qualified Stock Options (1)	\$4.4	09/14/2012	09/14/2012	A		15,000		10/14/2012	09/14/2022	Common Stock	15,000	\$4.4	499,992	D		

## **Explanation of Responses:**

## Remarks:

(1)Stock option issued pursuant to the Company's 2008 Equity Incentive Plan are vested over a four year period at a rate of 1/48th per month.

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

09/17/2012

\*\* 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.