## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
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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* FRIEDMANN NADAV					2. Issuer Name and Ticker or Trading Symbol PAIN THERAPEUTICS INC [ PTIE ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
					3.0	Date of Earliest Transaction (Month/Day/Year)								_	v (	Director Officer (give to	tle		(specify	
(Last)	Last) (First) (Middle)					05/02/2011								21 k	elow) Chief O	ow) below Chief Operating Officer		)		
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(City)	(St	ate) (.	Zip)			X Form filed by One Reporting Person Form filed by More than One Reportin Person														
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	efici	ally O	vned				
Date				Date	Date Ex (Month/Day/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			nd Se Be Or	Amount of ecurities eneficially wned Followin	F (	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount		(A) or (D)	Price	.  Tr	ansaction(s) istr. 3 and 4)			(111511.4)	
Common	Stock <sup>(1)</sup>			05/02/2011 05/02/2011 J 4,357 A \$2.869 287,022 D																
		Та									sed of, onvertib					ed				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execuses Conversion (Month/Day/Year) if any		3A. Deem Execution if any (Month/Da	n Date, Transa Code (		saction of Der Sec (A) Disport of (I		ative rities ired osed	6. Date E Expiratio (Month/D	n Dat	e Am ar) Sed Un Del Sed		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price Derivat Securit (Instr. 5	ve derivativ	re es ally ig d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisa		Expiration Date	Title	of	mber ares						

## **Explanation of Responses:**

1. Common stock purchased pursuant to an Employee Stock Purchase Plan.

/s/Nadav Friedmann, PhD, MD 05/04/2011

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.