FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	
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STATEMENT	OF CHANGES IN	BENEFICIAL	OWNERSHIP

OMB APPROVAL									
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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				PAIN THERAPEUTICS INC [PTIE]							(Che	elationship o ck all applica Director	able)	Perso	on(s) to Issue		
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/11/2015								below)	give title ief Opera	nting (Other (sp below) Officer	ecify
(Street)				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(City)	(S	tate)	(Zip)									X Form filed by One Reporting Person Form filed by More than One Reporting Person				ng	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Trans Date (Month/			•	action 2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.			5. Amoun Securities Beneficia Owned Fo Reported	i Ily	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	/ A	Mount	(A) o (D)	r Price	Transacti (Instr. 3 a				(Instr. 4)
			Table II - Deri (e.g.					uired, Dis , options					Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		e and	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	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expi Date	iration	Title	Amount or Number of Shares		(Instr. 4)			
Stock Options(1)	\$1.86	12/11/2015	12/11/2015	A		300,000		01/11/2016	12/1	1/2025	Common Stock	300,000	\$1.86	3,711,35	50	D	_

Explanation of Responses:

Remarks:

(1) Stock option vest over four (4) years period at a rate of 1/48th per month.

/s/Nadav Friedmann, PhD, MD 12/15/2015

** 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.