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

**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* <u>GUSSIN ROBERT Z</u>							2. Issuer Name and Ticker or Trading Symbol PAIN THERAPEUTICS INC [ PTIE ]									Relationship of Reporting Person(s) to Issuer Check all applicable)  X Director 10% Owner				
(Last)	ast) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/19/2015									Officer (give title Other (specify below) below)				pecify	
(Street) (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transar Date (Month/Date						ear) E	A. Deemed execution Date, any Month/Day/Year		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)				5. Amour Securitie Beneficia Owned F	s illy ollowing	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D) Pr		ce	Reported Transacti (Instr. 3 a	tion(s)			(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)	3A. Deemed Execution D if any (Month/Day/	Code		saction of Deriv Secu Acqu (A) o Disp		erivative (lecurities cquired		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				C	Code	v	(A)	(D)	Date Exercis		Expiration Date	Title	Amou or Numb of Share	oer						
Non- Qualifying Stock Options	\$1.77	06/19/2015			A		15,000		07/19/2	015	06/19/2025	Common Stock	15,0	00	\$1.77	692,76	i3	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 **Attorney** 

\*\* Signature of Reporting Person

06/24/2015

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.