FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APP     | ROVAL   |
|-------------|---------|
| OMB Number: | 2225 02 |

Estimated average burden hours per response: 0.5

## 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

| 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)                         |                              |  |  |          |  |
|---|--|--------|----------|---------|---|--|--|--|--------|-------|---|--------------------|---------------------|--|---|------------------------------|--|--|----------|--|
| BARBIER REMI  |  |        |          |         |   |  |  |  |        |       |   |                    | ) )                 | C Direct                                     | ctor  | X                            | 10% C  | wner   |          |  |
| (Last)  | t) (First) (Middle)  |        |          |         |   | 3. Date of Earliest Transaction (Month/Day/Year) 08/07/2006                |  |  |        |       |   |                    |                     | 7  | X Officer (give title below) Other (specific below)  President & CEO                            |                              |  |  |          |  |
| (Street)  |  |        |          |         | 4. If   | 4. If Amendment, Date of Original Filed (Month/Day/Year)                   |  |  |        |       |   |                    |                     |  | 6. Individual or Joint/Group Filing (Check Applicable Line)                                     |                              |  |  |          |  |
|   |  |        |          |         |   |  |  |  |        |       |   |                    |                     |  | X Form filed by One Reporting Person  |                              |  |  |          |  |
| (City)  | (St  | ate) ( | Zip)     |         |   |  |  |  |        |       |   |                    |                     |  | Form filed by More than One Reporting Person  |                              |  |  |          |  |
|   |  | Tabl   | e I - No | n-Deriv | ative   | Sec  | curitie  | s Ac   | quired | , Dis | posed o   | f, or I            | 3ene                | eficiall                                     | y Owne  | ed                           |  |  |          |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date) |  |        |          |         | Execution I   |  | Date,  | Code (Ins  |        |       |   | iired (<br>nstr. 3 | A) or<br>3, 4 and 5 | Securi<br>Benefi<br>Owne                     | Securities<br>Beneficially  |                              | nership<br>Direct<br>Indirect<br>str. 4)               | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |          |  |
|   |  |        |          |         |   |  |  |  | Code   | v     | Amount  | (A)<br>(D)         | or                  | Price  | Transa  | action(s)<br>3 and 4)        |  |  | (1130.4) |  |
| Common Stock <sup>(1)</sup> 08/07                             |  |        |          |         | /2006 08/   |  | 08/07/   | 2006   | S      |       | 35,000  | 0 D \$8.           |                     | \$8.561                                      | 7 7,8   | 7,895,200                    |  | D  |          |  |
|   |  | Та     |          |         |   |  |  |  |        |       | osed of,<br>onvertib  |                    |                     |  | Owned   |                              |  |  |          |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any |        | n Date,  |         | Transaction Code (Instr. 8)  B)  Code (Instr. 3, 4 and 5) |  | rative<br>rities<br>ired<br>r<br>osed<br>)<br>: 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date |        |       | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares |                    | str. 3              | Price of<br>erivative<br>ecurity<br>nstr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ov<br>Fo<br>Dir<br>or<br>(I) | vnership<br>vrm:<br>rect (D)<br>Indirect<br>(Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |          |  |

## **Explanation of Responses:**

1. The proposed sale is made pursuant to a plan intended to comply with Rule 10b5-1 (c), previously adopted on February 1,2006, when I was not aware of material non-public information.

/s/Remi Barbier

08/07/2006

\*\* 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.