SEC Form 4	
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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. <i>See</i> Instruction 1(b).
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person [*] SCANNON PATRICK J MD PHD						2. Issuer Name and Ticker or Trading Symbol PAIN THERAPEUTICS INC [PTIE]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) PAIN THERAPEUTICS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 09/14/2018								1	Officer below)	(give title		Other (s below)	specify	
(Street) (City) (State) (Zip)					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	 Individual or Joint/Group Filing (Check Applicable ine) 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) Date (Month/E					Execution Date,		3. 4. Securities Acquired (A) Transaction Disposed Of (D) (Instr. 3, 4) Code (Instr. 8) 5)						s Form Ily (D) o ollowing (I) (In		7. Nature of Indirect Beneficial Ownership					
						Code V Amount (A) or (D)		Price	Transact	ansaction(s) str. 3 and 4)			(Instr. 4)							
			Table II -								osed of, convertil				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date, Trans Code			of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s lly I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisat		Expiration Date	Title	or Nui of	nount mber ares						
Stock Options(1)	\$0.95	09/14/2018	09/14/20	018	А		10,000		10/14/203	18	09/14/2028	Common Stock	10	,000	\$0.95	107,40	00	D		

Explanation of Responses:

Remarks:

(1) None-Qualifying Stock Options issued pursuant to the Company's Equity Incentive Plan vest over four (4) years period at a rate of 1/48th per month.

09/18/2018

Date

** Signature of Reporting Person

/s/Remi Barbier by Power of

Attorney

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.