FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								

0.5

hours per response:

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*  RODDY PETER S				2. Issuer Name <b>and</b> Ticker or Trading Symbol PAIN THERAPEUTICS INC [ ptie ]									heck all a Dir	pplicable) ector		Owner			
(Last)	(Fii	rst) (I	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/01/2007											ow) (	ter (give title Other below)  Vice President and CFO		
(Street)				4. If An	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(City)	(St	ate) (2	Zip)												Fo	m filed by One Reporting Person m filed by More than One Reporting son			
		Tabl	e I - Non	-Deriv	ative S	ecuri	ities /	Acqı	uired,	Disp	osed o	f, or	Bene	ficia	ally Ow	ned			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Date,		ate,	3. 4. Securi Transaction Disposed Code (Instr. 8)		rities Acquired (A) o			nd Secu Ben Own	nount of irities eficially ed Following	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	of Indirect Beneficial Ownership				
								Code	v	Amount		(A) or (D)	Price	Tran	orted saction(s) r. 3 and 4)		(Instr. 4)		
Common Stock <sup>(1)</sup> 11/01/				2007			P		1,026		A \$6		5 22,441		D				
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 Date if any (Month/Day/Yea	Date,	4. Transactic Code (Ins 8)	on of tr. D Si A (A D of	n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price o Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code		, ,		Date		Expiration	Title	or Num of	ber					

## Explanation of Responses:

 $1. \ Common \ Stock \ purchased \ pursuant \ to \ the \ Company's \ 2000 \ Employee \ Stock \ Purchase \ Plan.$ 

/s/ Peter S. Roddy

11/02/2007

\*\* Signature of Reporting Person 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.