FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

vvasinigtori,	D.C. 20049	

OMB APPROVAL									
OMB Number:	3235-0287								
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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* LOUCKS VERNON R JR				2. Issuer Name and Ticker or Trading Symbol PAIN THERAPEUTICS INC [PTIE]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
LUUC.	K5 VERI	NON R JR												X	Director			10% Ow	ner
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/26/2005									Officer (below)	give title		Other (s below)	pecify
1101 SK	OKIE BLV	D., SUITE 240				, 20, 2	000												
					4 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)								Julio	or originar i	ou (,, ,		Line)	rada or o	э Отоар	9	(000, pp	oab.o
,	BROOK IL		60062											X	Form fil	ed by One	Repo	rting Persor	1
		•			-								Form filed by More than One Reporting Person				ting		
(City)	(S	tate)	(Zip)																
		Tal	ole I - Nor	n-Deriv	vativ	e Se	curities	s Ac	quired, D	isp	osed of	f, or Ber	nefic	ially	Owned				
1. Title of Security (Instr. 3) 2. Trans Date (Month/I				action 2A. Deemed Execution Date, if any (Month/Day/Year)			Code (Instr. 5)				d (A) o	4 and Securitie Beneficia Owned F		s For ally (D)		orm: Direct) or Indirect	7. Nature of Indirect Beneficial Ownership		
							Code V		Amount	(A) or (D)	Pri	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	Date, T	4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security		9. Number derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	Ow For Dir or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				C	Code	v	(A)	(D)	Date Exercisable		xpiration vate	Title	Amo or Num of Shar	ber					
Non- Qualifying Stock	\$5.34	05/26/2005	05/26/20	05	A		25,000		05/26/2006 ⁽¹⁾	0	5/26/2015	Common Stock	25,0	000	\$5.34	90,000	0	D	

Explanation of Responses:

1. Stock options are cliff-vested over a four year period at a rate of 25% of the shares on the anniversary of the date of grant.

//Peter S. Roddy by power of attorney

05/26/2005

** 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.