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	STATEMENT OF CHANGE
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Section 16(a

OMB APPROVAL S IN BENEFICIAL OWNERSHIP

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* Ramasastry Saira					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) 501 CAN	Last) (First) (Middle) 501 CANAL BLVD.						3. Date of Earliest Transaction (Month/Day/Year) 05/16/2014						(give title	give title Other (sp below)		pecify	
(Street) RICHMO		tate)	94804 (Zip)	_	4. If Amendment, Date of Original Filed (Month/Day/Year)						Lin	E) X Form f Form f Persor					
		Tab	le I - Non-De	erivativ	e Se	curities	s Ac	quired, Di	sposed	of, or Be	neficial	ly Owned	l				
Date			ransaction e nth/Day/Y	Execution Date,		3. Transaction Code (Instr. 3) 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) 5)		red (A) or str. 3, 4 and	Beneficia Owned F	es For ally (D) Following (I) (m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
							Code V	Amoun	t (A) o	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)		
		-	Table II - Der (e.g					uired, Dis , options,				Owned			· · · · · · · · · · · · · · · · · · ·		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Yea	Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Non- Qualifying Stock Options	\$4.59	05/16/2014	05/16/2014	A		50,000		05/16/2015	05/16/2024	Common Stock	50,000	\$4.59	140,000	0	D		

Explanation of Responses:

Remarks:

(1) Non-Qualifying Stock Options issued pursuant to the Company's 2008 Equity Incentive Plan vest over 4 year period at a rate of 25% of the shares granted, starting May 16, 2015.

/s/ Peter S. Roddy by Power of 05/19/2014 **Attorney**

** 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.