FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average bu	urden						
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*  BARBIER REMI				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		X	10% Ow	ner		
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)								X	Officer ( below)	give title		Other (specification)	pecify		
					06/08/2007									President and CEO						
(Street)				4	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi Line)	6. Individual or Joint/Group Filing (Check Applicable .ine)							
				_									X	X Form filed by One Reporting Person						
(City)	(S	tate)	(Zip)										Form file 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)  2. Transa Date (Month/D			e	Day/Year) if any		ution Date,		Transaction Dispose Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 ar			5. Amount Securities Beneficial Owned Fo	Form (D) or		: Direct I Indirect E str. 4)	7. Nature of ndirect Beneficial Dwnership			
								Code	/ A	Amount (A) or (D)		rice	Reported Transactio (Instr. 3 an			1	nstr. 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 Date, if any (Month/Day/Year)	4. Transaction Code (Instr. )		Derivative E		Expi	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun Securities Underlyi Derivative Security (Instr. 3 and 4)		lying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exe	e rcisable	Expir Date		Title		unt or per of es		(Instr. 4)				
Stock Options <sup>(1)</sup>	\$8.25	06/08/2007		A		325,000		07/0	08/2007	06/08	3/2017	Common stock	325,	000(1)	\$8.25	2,076,5	000	D		

## Explanation of Responses:

1. Incentive Stock Options are granted based on the Internal Revenue Service limitations and Non-Qualifying Stock Options are granted for options exceeding those limits. Stock options are vested over a four (4) year period at a rate of 1/48th per month.

/s/ Remi Barbier

06/12/2007

\*\* 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.