FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

vvasimigton, b.c. zoc	7-10

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									

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* SCHOENHARD GRANT					2. Issuer Name and Ticker or Trading Symbol PAIN THERAPEUTICS INC [PTIE]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/05/2013								helow)	(give title hief Scientific		Other (s below) Officer	pecify	
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(City)	(S	tate)	(Zip)										Form fi	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) 2. Transa Date (Month/D				е	Execution Date,			Code (Instr.			ed (A) or str. 3, 4 and	Beneficia Owned F	s lly ollowing	Form: (D) or	orm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	/ A	Amount	(A) (D)	r Price	Reported Transacti (Instr. 3 a			(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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		saction Deriv le (Instr. Secu Acqu or Dis of (D) 3, 4 a		e s I (A) sed str.	Expiration D	5. 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	e s Illy J	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Exp Date	oiration e	Title	Amount or Number of Shares		(Instr. 4)	on(s)			
Stock Options (1)	\$2.41	06/05/2013	06/05/2013	A		150,000		07/05/2013	06/0	05/2023	Common stock	150,000	\$2.41	1,272,4	189	D		

Explanation of Responses:

Remarks:

(1) Stock option vest over a four (4) year period at a rate of 1/48th per month.

/s/ Grant Schoenhard 06/10/2013

** 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.