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									
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*  SCANNON PATRICK J MD PHD					2. Issuer Name <b>and</b> Ticker or Trading Symbol PAIN THERAPEUTICS INC [ PTIE ]						(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last) (First) (Middle) C/O XOMA, LTD.				3. Date of Earliest Transaction (Month/Day/Year) 05/04/2017							Officer (give title below)  Other (specify below)			pecify			
2910 SEVENTH STREET				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable					
(Street) BERKEI	LEY C	A	94710								Line	X Form f	iled by One iled by More				
(City)	(S	tate)	(Zip)														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date			Transactio te onth/Day/Y	Execution Date,		3. Transaction Code (Instr. 8) 8 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)				Beneficia Owned F	ally following	6. Ownersl Form: Dire (D) or Indir (I) (Instr. 4)	ct o	7. Nature of Indirect Beneficial Ownership			
							Code V	Amount	(A) oi (D)	Price	Reported Transact (Instr. 3 a	ion(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 Date, if any (Month/Day/Yea	Code				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 derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Own Forn Direc or In (I) (Ir	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 (1)	\$0.78	05/04/2017	05/04/2017	A		50,000		05/04/2018	05/04/2027	Common Stock	50,000	\$0.78	679,128	3	)		

## **Explanation of Responses:**

(1) Non-Qualifying Stock Options issued pursuant to the Company's 2008 Equity Incentive Plan vest over 4 years at the rate of 25% of the shares granted, starting May 4, 2018.

/s/Remi Barbier by Power of <u>Attorney</u>

05/05/2017

\*\* 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.