FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT C
obligations may continue. See	
Instruction 1(b).	Filed pursu
	or S

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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* <u>GUSSIN ROBERT Z</u>					2. Issuer Name and Ticker or Trading Symbol PAIN THERAPEUTICS INC [PTIE]								. Relationship of Reporting Person(s) to Issuer Check all applicable) X Director 10% Owner				
(Last)	(Fi	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/04/2017							Office below)	(give title		Other (s below)	pecify	
(Street)	rreet)				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(City)	(S	tate)	(Zip)										Form filed by More than One Reporting Person				
		Tab	le I - Non-D	Perivati	ve Se	curities	s Ac	quired,	Disp	osed o	of, or Be	neficia	lly Owned	l			
Date			Transaction ate Ionth/Day/	Execution Date,		Code (Instr. 5)				d Securition Benefici Owned I	5. Amount of Securities Beneficially Owned Following		: Direct Control of the control of t	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) oi (D)	r Price	Reporte Transac (Instr. 3	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	Date (Month/Day/Year) if	Execution Date, if any	Code	saction (Instr.	of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Code	v	(A)	(D)	Date Exercisabl		xpiration vate	Title	Amount or Number of Shares					
Non- Qualifying Stock Options	\$0.78	05/04/2017	05/04/2017	A		50,000		05/04/201	8 0	5/04/2027	Common Stock	50,000	\$0.78	739,12	28	D	

Explanation of Responses:

Remarks:

(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.

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

** Signature of Reporting Person Date

05/05/2017

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.