FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								
Estimated average b	ourden								

0.5

hours per response:

Cricck triis box ii no longer subject te
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*  RODDY PETER S						2. Issuer Name <b>and</b> Ticker or Trading Symbol PAIN THERAPEUTICS INC [ ptie ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last)						3. Date of Earliest Transaction (Month/Day/Year) 11/15/2006									v Of	ector icer (give title ow) Chief Fina	ıncia	10% Owner Other (specify below)		
(Street)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(City)	(St	ate) (2	Zip)												Fo	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. Transar Date (Month/Da					ar)	ZA. Deemed Execution Date, f any Month/Day/Year)		Transaction Dispose Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3,			nd Seci Ben Owr	mount of irities eficially ed Following orted	Fori	Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	() 1)	(A) or (D) Pri		Tran	saction(s) r. 3 and 4)			(Instr. 4)	
Common Stock 11/15/					5/2006	/2006		G		4,000 D		D	\$0	)	16,757		D			
		Та	ble II - D								sed of, onvertib				/ Owne	d				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Exercise (Month/Day/Year) if				4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price o Derivative Security (Instr. 5)		,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Num of Sha	ber						

**Explanation of Responses:** 

/s/ Peter S. Roddy

11/16/2006

\*\* 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.