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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

s of Reporting F Bullaro	erson [*]	2. Issuer Name and Ticker or Trading Symbol Pacira Pharmaceuticals, Inc. [PCRX]	(Check	tionship of Reporting Pe all applicable) Director Officer (give title	son(s) to Issuer 10% Owner Other (specify
(Last) (First) (Middle) C/O PACIRA PHARMACEUTICALS, INC. 5 SYLVAN WAY, SUITE 300 (Street) PARSIPPANY NJ 07054 (City) (State) (Zip)		3. Date of Earliest Transaction (Month/Day/Year) 06/07/2017		below) Vice President,	below) , Finance
		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person	
	Bullaro (First) IARMACEU 7, SUITE 300	Bullaro (First) (Middle) IARMACEUTICALS, INC. 7, SUITE 300 NJ 07054	Bullaro Pacira Pharmaceuticals, Inc. [PCRX] (First) (Middle) IARMACEUTICALS, INC. 3. Date of Earliest Transaction (Month/Day/Year) 06/07/2017 06/07/2017 NJ 07054	Bullaro Pacira Pharmaceuticals, Inc. [PCRX] (Check (First) (Middle) IARMACEUTICALS, INC. 3. Date of Earliest Transaction (Month/Day/Year) X 06/07/2017 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Indiv NJ 07054 X	Bullaro Pacira Pharmaceuticals, Inc. [PCRX] (Check all applicable) (First) (Middle) IARMACEUTICALS, INC. 3. Date of Earliest Transaction (Month/Day/Year) Officer (give title below) Vice President, Vice President, NJ 07054 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filin NJ 07054 X Form filed by One Re

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)						5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(moth 4)
Common Stock	06/07/2017		S		1,119	D	\$44.37	7,063	D	

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. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed	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 of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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				

Explanation of Responses:

Remarks:

/s/ Lauren Riker

** Signature of Reporting Person Date

06/09/2017

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.

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