FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	

OMB API	PROVAL								
OMB Number:	3235-0287								
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0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

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

1(0). 0	ee instruction i	· .			,														
1. Name and Address of Reporting Person* RIKER LAUREN					2. Issuer Name and Ticker or Trading Symbol Pacira BioSciences, Inc. [PCRX]									Relationship of Reporting Person(s) to Issuer (Check all applicable)					
KINER LAUKEN														Director		10% Ow			
(1.0) (5:0) (4:11)													_		Officer (give title below)		Other (s	specify	
(Last) (First) (Middle) C/O PACIRA BIOSCIENCES, INC.					3. Date of Earliest Transaction (Month/Day/Year) 01/02/2025								Senior Vice President, Finance						
5401 WEST KENNEDY BOULEVARD, SUITE																			
890				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)																rm filed by Or	ne Rep	orting Perso	on
TAMPA	FL	3	3609													rm filed by Mo erson	ore tha	n One Repo	orting
(City)	(Sta	ate) (Z	Zip)																
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	, Dis	posed of	, or l	Ben	efici	ally Ov	vned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)				Execution Date,		Date,	3. 4. Securities Acquired (A Disposed Of (D) (Instr. 3) 5)				nd Sec Ber Owi	mount of urities eficially ned Following	Form (D) o	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D) Pri		Price	Trai	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 01/02/2					2025			F ⁽¹⁾		159	D \$18		\$18	37,916.335			D		
		Tal									osed of,					ned			
				(e.g., pu	15, 6	1115, V	vaiic	ants,	Optio	115, 0	Ollvertib	16 36	Cui	illes	<u>' </u>				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any		on Date,	4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (ID) (Instr. 3, 4 and 5)		rative rities rired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		f g	8. Price Derivati Security (Instr. 5)	derivative Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Ownership Form:	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or Nu of	ount nber ires					

Explanation of Responses:

Remarks:

/s/ Kristen Williams, 01/06/2025 Attorney-in-Fact

** 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.

^{1.} Represents shares sold by the reporting person to cover tax obligations upon the vesting of restricted stock units.