FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

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

Name and Address of Reporting Person*     Manning Donald C.						2. Issuer Name and Ticker or Trading Symbol Pacira BioSciences, Inc. [ PCRX ]									ationship of Reporting I k all applicable) Director Officer (give title below) Chief Medica		ng Person(s) to Iss 10% Ow Other (s		ner
(Last) (First) (Middle) C/O PACIRA BIOSCIENCES, INC. 5 SYLVAN WAY, SUITE 300				3. Date of Earliest Transaction (Month/Day/Year) 06/02/2021									lical (	below)			speary		
(Street) PARSIPPANY NJ 07054 (City) (State) (Zip)				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
1 Tido of	Caarreiter (In		I - No						uired	l, Dis	posed of	-			1		ا د م	vnership	7. Nature
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day)				Execution Dat		ate,	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)		str. 3, 4 a	4 and Se Be				n: Direct or Indirect nstr. 4)	of Indirect Beneficial Ownership		
									Code V		Amount	(A) o (D)	r Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 06/02/20				)21			S		2,380(1)	D	\$62.	52.123		26,120		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Date Ex- Security or Exercise (Month/Day/Year) if a		if any	emed tion Date, h/Day/Year)	4. Transaction Code (Instr. 8)		of	r osed (1. 3, 4	6. Date Exerc Expiration Da (Month/Day/\)  Date Exercisable		Amount of Securities Underlying Derivative Security (Ins 3 and 4)  Amount of Amount of Numl of		nt of ities rlying ative ity (Instr. 4)  Amount or Number	nt er		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

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

## Remarks:

/s/ Kristen Williams, Attorney-in-Fact

06/04/2021

\*\* 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.