FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## ATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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>HOFFMAN ROBERT</u>					2. Issuer Name and Ticker or Trading Symbol HERON THERAPEUTICS, INC. /DE/ [ HRTX ]								5. Relationship of Reporting Pers (Check all applicable)  Director  Officer (give title				on(s) to Issu 10% Ow Other (s	ner
(Last) (First) (Middle) 4242 CAMPUS POINT COURT SUITE 200				12	3. Date of Earliest Transaction (Month/Day/Year) 12/15/2018								X Onles (give the Other (specify below)  CFO & SVP, Finance					
(Street) SAN DIE			92121	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Indivine)	,						
(City) (State) (Zip)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Trans Date (Month)  Table II - Deriva			Transaction te onth/Day/Yo	action 2A. Deemed Execution Date,		3. Transacti Code (Ins 8) Code V	4. Securition Disposed 5)  Amount Sposed of,		(A) or (D) Price		nd ly O	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		. Nature of Indirect Seneficial Ownership Instr. 4)		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	4. Transaction Code (Instr		5. Number of		6. Date Exercisal Expiration Date (Month/Day/Year		oble and 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		d Amour ies g Security nd 4)	nt 8 D S (I		9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Exp Dat	piration te	Title	Amoun or Numbe of Shares	r					
Employee Stock Option (Right to Buy)	\$24.97	12/15/2018		A		71,000		(1)	12/:	15/2028	Common Stock	71,00	0	\$0.00	71,00	0	D	

## **Explanation of Responses:**

1. The stock option vests and becomes exercisable in 48 equal monthly installments beginning one month after the date of grant.

## Remarks:

/s/ Robert E. Hoffman

12/18/2018

\*\* 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.