Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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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

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response.	0.5							

											· ·									
1. Name and Address of Reporting Person* MANHARD KIMBERLY						2. Issuer Name and Ticker or Trading Symbol HERON THERAPEUTICS, INC. /DE/ [5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
MANE	<u>IARD KI</u>	<u>MBERLY</u>						1111/10/	H L	110	<u>5, 11 (C.</u>	/ D L	<u>~</u> L	:	X Directo	or		10% Ov	vner	
(Last)	(F	irst)	(Middle)		- 111	HRTX]									X Officer below)	(give title		Other (s	specify	
` '	,	INT COURT	(3. Date of Earliest Transaction (Month/Day/Year)								EVP, Drug Development						
SUITE 2		in Coon			12	12/22/2020														
SUITE 2	00					4. If Amendment, Date of Original Filed (Month/Day/Year)									3. Individual or Joint/Group Filing (Check Applicable					
(Street)					_ 4. '	II AIIIC	riume	III, Dale	or Origin	ai Filet	i (ivioriti i/D	аулеа	11)	Line		John Group	יווווין כ	(Crieck Ap	plicable	
SAN DII	EGO C	Α	92121											:	Y Form filed by One Reporting Person				n	
					_												re thar	n One Repo	rting	
(City)	(S	itate)	(Zip)			Person														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
			2. Transaction Date			2A. Deemed Execution Date,		3.							5. Amount of			7. Nature of Indirect		
					h/Day/Year)		if any (Month/Day/Year		Code (Instr. 5			Disposed Of (D) (Instr. 3, 4			Benefici	ally (D	(D) o) or Indirect	Beneficial	
									ar) 8)	_	+			_	Reported	ı " "	(1) (11)	(Instr. 4)	Ownership (Instr. 4)	
										e V	Amount		(A) or (D)	Price	Transact (Instr. 3	ion(s) and 4)				
Common	Common Stock 1			12/2	2/202	2/2020			M ⁽¹⁾		10,00	10,000 A		\$13	10),000		D		
Common Stock 12/2			12/2	2/202	2/2020		S (1)		10,000		D	\$20	0			D				
		•	Table II -	Deriva	ative	Sec	uritie	es Acq	uired,	Disp	osed of	, or E	Benef	icially	Owned			,		
				(e.g., p	puts,	call	s, wa	arrants	, optic	ons, o	converti	ble s	ecur	ities)						
1. Title of Derivative Security 1. Title of Derivative Security 2. Conversion or Exercise (Month/Day/Year) Derivative Security 3. Transaction Date Execution I if any (Month/Day				Date,	Code (Instr.				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 derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
														Amount or						
									Date		Expiration			Number of						
					Code	٧	(A)	(D)	Exercis		Date	Title		Shares						
Employee Stock																				
Option (Right to	\$13	12/22/2020			M ⁽¹⁾			10,000	(2)		12/21/2026	Com Sto		10,000	\$0.00	48,41	6	D		

Explanation of Responses:

- 1. The stock option exercise and sale of common stock reported in this Form 4 was effected pursuant to a Rule 10b5-1 plan dated as of September 15, 2020.
- 2. The stock option vested and became exercisable in 48 equal monthly installments beginning one month after the date of grant (12/21/2016).

Remarks:

/s/ Lisa Peraza Attorney-in-fact 12/23/2020 for Kimberly Manhard

** 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.