Kaye Randall Form 4 June 15, 2010

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

washington, D.C. 2034)

Expires: January 31, 2005

Section 16.
Form 4 or
Form 5
obligations

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

obligations may continue.

See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

See Instruction 30(n) of the investment could be a see Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Kaye Randall Issuer Symbol AVANIR PHARMACEUTICALS, (Check all applicable) INC. [AVNR] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner _X__ Officer (give title _ _ Other (specify (Month/Day/Year) below) 101 ENTERPRISE, SUITE 300 06/13/2010 Sr. VP, Chief Medical Officer

(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)

Applicable Line)
X Form filed by One Reporting Person
___ Form filed by More than One Reporting

Person

6. Individual or Joint/Group Filing(Check

ALISO VIEJO, CA 92656

(City)	(State) (Z	Zip) Table	I - Non-Do	erivative Securities	Acquired, Disposed	of, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securities Acquiron(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Pr	sed 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Securities Form: Direct Beneficially (D) or Owned Indirect (I) Following (Instr. 4) Reported Transaction(s)	
Common Stock	06/13/2010		F(1)	1,447 D \$ 2.3	71 303,483 (2)	D	
Common Stock					6,250	I	By son (3)
Common Stock					6,250	I	By daughter (3)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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. Transact Code (Instr. 8)	5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
					(Instr. 3, 4, and 5)	Date	Expiration		Amount		
				Code V			Date	Title	Number of Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> 10% Owner Officer Other Director

Kave Randall 101 ENTERPRISE, SUITE 300 ALISO VIEJO, CA 92656

Sr. VP, Chief Medical Officer

Signatures

/s/ Christine G. Ocampo, by power of attorney for Randall E. Kaye

06/15/2010

**Signature of Reporting Person

Date

Explanation of Responses:

- 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).
- Represents shares surrendered to the Issuer by the Reporting Person to pay required tax withholdings due upon the vesting of Restricted (1) Stock Units granted to the Reporting Person under the Issuer's 2005 Equity Incentive Plan. The shares surrendered were valued based on the closing price of the Issuer's common stock on the vesting date.
- Includes shares of common stock underlying restricted stock units granted to the Reporting Person, which are subject to certain vesting **(2)** conditions.
- The Reporting Person disclaims beneficial ownership of these shares, and this report shall not be deemed an admission that the Reporting Person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to 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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