FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES IN	N BENEFICIAL	OWNERSHIP
• .,	O. O		• • • • • • • • • • • • • • • • • • • •

ı	UNIB APPRO	IVAL
l	OMB Number:	3235-0287
l	Estimated average burde	en
l	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

1. Name and Address of Reporting Person* <u>Hora Maninder</u>					2. Issuer Name and Ticker or Trading Symbol NEKTAR THERAPEUTICS [NKTR]					(Ch	eck all applic	cable)	Person(s) to Is	wner	
(Last) (First) (Middle) 455 MISSION BAY BOULEVARD SOUTH				3. Date of Earliest Transaction (Month/Day/Year) 02/06/2013						helow)	below) SVP Pharma Dev a				
(Street) SAN FRANCI			94158	4.	If Ame	endment, [Date (of Original File	ed (Month/Da	ay/Year)	Lin	e) <mark>X</mark> Form f	iled by One I	Filing (Check A Reporting Pers than One Rep	on
(City)	(5		(Zip)												
			le I - Non-De		_			<u> </u>	-	-					
Date			ransaction e nth/Day/Y	Execution Date,		Code (Instr. 5)				Benefici	es Fo ially (D) Following (I)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code V	Amount	(A) or (D)	Price	Transact (Instr. 3	tion(s)		(Instr. 4)
		-	Fable II - Der (e.g					uired, Dis s, options,				Owned	,		
1. Title of Derivative Security (Instr. 3) 1. Title of Conversion Date (Month/Day/Year Price of Derivative Security Conversion Date (Month/Day/Year Pri			3A. Deemed Execution Date, if any (Month/Day/Year	Code	Transaction of Code (Instr. Derivative		ve es d ed nstr.	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Ar of Securities Underlying Derivative Sec (Instr. 3 and 4		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr.	Beneficial Ownership t (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option	\$8.8	02/06/2013		A		50,000		(1)	02/05/2021	Common Stock	50,000	\$0	50,000	D	
Stock Option	\$8.8	02/06/2013		A		50,000		(2)	02/05/2021	Common Stock	50,000	\$0	50,000	D	

Explanation of Responses:

- 1. This option was granted on February 6, 2013 and vests in monthly installments over the four-year period following the grant date.
- 2. This stock option is subject to both time-based vesting and performance-based vesting conditions, both of which must be met before the shares subject to the option become vested and exerciseable. The timebased vesting is on a monthly pro-rata basis over a period of four (4) years from the grant date (February 6, 2013). The performance-based vesting condition will be met only if Nektar (or a licensee) files a new drug registration with the FDA or the European Medicines Agency for a significant drug candidate program including, without limitation, the following: (1) naloxegol (an oral peripherally-acting opioid antagonist); (2) etirinotecan pegol (a topoisomerase I inhibitor); (3) NKTR-061/Amikacin Inhale (a drug-device combination for an inhaled solution of amikacin); or (4) BAX-855 (a longer-acting (PEGylated) form of a full-length recombinant factor VIII (rFVIII) protein).

Gil M. Labrucherie, Attorney-02/08/2013 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.