Instruction 1(b)

## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CH
obligations may continue. See	

## ANGES 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*  Hora Maninder						2. Issuer Name and Ticker or Trading Symbol NEKTAR THERAPEUTICS [ NKTR ]								(Ched	k all app Dired	olicable)	g Person(s) to Is 10% C Other	
	CTAR THE	RAPEUTICS	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/16/2017							X	belo	w) ``	below) Dev & Mfg O		
455 MISSION BAY BOULEVARD SOUTH														is described a				
(Street) SAN FRANCI	sco C	A 9	94158		4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	Forn	Form filed by One Reporting Person  Form filed by More than One Reporting Person				
(City)	(9	tate) (	Zip)															
		Tabl	e I - No	on-Deriv	ative	Sec	uritie	s Ac	quired	l, Dis	sposed o	f, or I	Bene	ficially	Own	ed		
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day					Execution Date,		Date,	Transaction Disposed Of (D) Code (Instr.			s Acquired (A) or f (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or Pi	ice	Trans	action(s) 3 and 4)		(Instr. 4)
Common Stock 08/16/20				2017	:017		S		2,956(1)	Γ	\$	19.32 <sup>(2)</sup>	5	3,233 <sup>(3)</sup>	D			
		Та	ble II -								osed of, convertib				wned			
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security		3. Transaction Date (Month/Day/Year)	ay/Year)   Execution	on Date,		Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisab Expiration Date (Month/Day/Year)		e Amount of		De Se (In:	Price of rivative curity str. 5)	ative derivative rity Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amor or Numl of Share	per				

#### **Explanation of Responses:**

- 1. Represents the number of shares required to be sold by the reporting person to cover tax withholding obligations in connection with the vesting of the RSUs held by the reporting person. This sale is mandated by the Issuer's election under its equity incentive plans to require the satisfaction of tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary trade by the reporting person.
- 2. This transaction was executed in multiple trades at prices ranging from \$19.02 to \$19.67. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide full information regarding the number of shares and the prices at which the transactions were effected upon request to the SEC staff, the issuer, or a security holder of the issuer.
- 3. This number includes 6,000 shares held by the reporting person from the Issuer's ESPP plan. The acquisition of these shares under this plan is exempt under Rule 16b-3(c).

# Remarks:

Mark A. Wilson, Attorney-in-

06/18/2017

**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.