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(City)

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

(State)

(Zip)

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burd	en									
hours per response.	0.5									

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 Rep <u>Huh Hoyoung</u>	porting Person <sup>*</sup>	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>NEKTAR THERAPEUTICS</u> [ NKTR ]		ationship of Reporting Pe < all applicable) Director	erson(s) to Issuer 10% Owner
(Last) (First) 201 INDUSTRIAL RO	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/03/2008		Officer (give title below)	Other (specify below)
(Street) SAN CARLOS CA	94070	4. If Amendment, Date of Original Filed (Month/Day/Year) 03/05/2008	6. Indiv Line) X	vidual or Joint/Group Fili Form filed by One Re Form filed by More th	eporting Person

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	r (Instr. 3) Date (Month/Day/Year) (Month/Day/Year)		Transaction Code (Instr.						6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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. Transa Code ( 8)		of		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 of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option <sup>(1)</sup>	\$6.95	03/03/2008		A		8,750		(2)	03/03/2016	Common Stock	8,750	\$6.95	8,750	D	
Restricted Stock Units	\$0.01	03/03/2008		А		2,900		(3)	(3)	Common Stock	2,900	\$0.01	2,900	D	

#### Explanation of Responses:

1. This Form 4/A is being filed to correct an inadvertent typographical error in the number of options granted to Dr. Huh under the Non-Employee Director Compensation Plan on March 3, 2008.

2. This equity grant was pursuant to the Company's Compensation Plan for Non-Employee Directors, as amended and restated. 1/7th of the shares of common stock subject to the stock option vest each calendar month commencing March 31, 2008. The shares of common stock subject to the option shall fully vest on September 30, 2008, provided that the Reporting Person continues his service as a nonemployee director through such date.

3. This equity grant was pursuant to the Company's Compensation Plan for Non-Employee Directors, as amended and restated. The shares of common stock subject to the Restricted Stock Units shall all vest on September 30, 2008, provided that the Reporting Person continues his service as a nonemployee director through such date.

### Gil M. Labrucherie - Attorney-03/24/2008 in-Fact

Person

\*\* 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.