FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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).

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

Name and Address of Reporting Person* ROBIN HOWARD W						2. Issuer Name and Ticker or Trading Symbol NEKTAR THERAPEUTICS [NKTR]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last)	`	rst) (RAPEUTICS	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/06/2017								X X		er (give title		Other (specify below)		
455 MISSION BAY BOULEVARD SOUTH					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) SAN FRANCI	·														Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Si	tate) (Zip)																	
		Tab	le I -	Non-Deriv	ative \$	Sec	urit	ies Ac	quired	, Dis	sposed o	of, or B	enefici	ally	Owne	d				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y					Year) i	Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			4 and Securi Benefi Owned		cially	Form (D) o Indir	n: Direct r ect (I)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)			Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)	
Common Stock ⁽¹⁾ 09/06/20)17	17			M		83,333	33 A \$1		.34	235,837			D		
Common Stock ⁽¹⁾ 09/06/20)17	17			S		83,333	3,333 D \$2		54(2)	152,504			D			
Common Stock														410			by spouse			
	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)	if any (I. Fransaction Code (Instr.		ivative urities urited or posed D) tr. 3, 4	6. Date E Expiration (Month/I	n Da	Securities Underlying Derivative Security (Ins and 4)		of es ng ee (Instr. 3			9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form Direct or In (I) (Ir 4)	Ownership Form: Direct (D) or Indirect I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amoun or Numbe of Shares							
Stock Option ⁽¹⁾	\$11.34	09/06/2017			M			83,333	02/01/20	14	01/31/2018	Common Stock	83,33	3	\$0.00	333,333		D		

Explanation of Responses:

- 1. This transaction was made pursuant to a Rule 10b5-1 trading plan adopted by Mr. Robin on March 9, 2017 related to 500,000 stock options scheduled to expire on January 31, 2018.
- 2. This transaction was executed in multiple trades at prices ranging from \$21.09 to \$21.79. 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.

Remarks:

Mark A. Wilson, Attorney-in-Fact

09/08/2017

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

** Signature of Reporting Person

n Date

* 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.