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(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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

Name and Address of Reporting Person* Thomsen Jillian B.						2. Issuer Name and Ticker or Trading Symbol NEKTAR THERAPEUTICS [NKTR]									all app Direc Office	er (give title	ng Pei	10% Ov	vner
(Last) (First) (Middle) C/O NEKTAR THERAPEUTICS 455 MISSION BAY BOULEVARD SOUTH				3. Date of Earliest Transaction (Month/Day/Year) 02/16/2022										SVP 8	v) & Chief A	ccoui	below) nting Offi	cer	
(Street) SAN FRANCISCO CA 94158 (City) (State) (Zip)				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Table	I - No	on-Deriva	tive S	Secu	rities	Acc	quirec	d, Dis	posed of	, or E	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/					if any	eemed tion Date, n/Day/Year)		3. 4. Securities Transaction Code (Instr. 8)					and 5) Secur Benef Owne		cially I Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) o (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 02/16/20					022				S		2,363(1)	D	\$10.9)5 ⁽²⁾	5(2) 165,318(3)			D	
		Tal	ble II	- Derivati (e.g., pເ							osed of, convertib				Owne	d			
Derivative Conversion Date Exercise (Month/Day/Year) if an						action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Dat (Month/Day/Ye		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Deri Sec	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	/ Di Or Or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Number of Shares						

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 \$10.77 to \$11.20. 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 988 shares held by the reporting person in the Issuer's 401(K) plan and 6,190 shares held by the reporting person in the Issuer's ESPP plan. The acquisition of these shares under both plans is exempt under Rule 16b-3(c).

Remarks:

Mark A. Wilson

02/18/2022

** 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.