## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

Washington, D.C. 2004

in, D.C. 20549			OMB AP	PROVAL

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028
	Estimated average burde	en
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response:	0
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Instruc	tion 1(b).			File								s Exchanç pany Act o			4					
Name and Address of Reporting Person* Lingnau Lutz						2. Issuer Name and Ticker or Trading Symbol NEKTAR THERAPEUTICS [ NKTR ]									(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner				
	CTAR THE	RAPEUTICS	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/19/2007								Officer below)	(give title		Other (s below)	pecify		
201 INDUSTRIAL ROAD  Street)						f Ame	ndment, [	Date o	of Orig	ginal File	ed (	Month/Da	y/Yea	ar)	Line	)	·	J	(Check Apporting Persor	
SAN CA	RLOS C	A	94070													Form fi Person		e than	One Repor	ting
(City)	(S	tate)	(Zip)																	
		Tab	le I - Nor	n-Deriv	ative	e Se	curities	s Ac	quire	ed, Di	sp	osed o	f, o	r Bene	eficiall	y Owned				
Title of Security (Instr. 3)  2. Transa Date (Month/D				Execution Date,			Code (Instr. 5)					5. Amour Securitie Beneficia Owned F Reported	s ally ollowing	Form: ly (D) or		7. Nature of Indirect Beneficial Ownership Instr. 4)				
									Co	ode V		Amount (A) or (D)			Price	Transaction(s) (Instr. 3 and 4)				IIIsu. 4)
		٦	Гable II -									sed of, onvertib				Owned				
Title of Derivative Security Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)  3. Deemed Execution Date, if any (Month/Day/Year)		Date, T		ransaction of ode (Instr. Derivative		ve es d ed nstr.	Expir	te Exerc ration Da th/Day/\	ate	of Secur		ecurities lerlying ivative S tr. 3 and	ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
														0	inount or lumber					

## **Explanation of Responses:**

\$8.81

\$0.01

1. The Reporting Person is receiving this equity compensation under the Amended and Restated Compensation Plan for Non-Employee Directors.

Code

(A)

15,000

5,000

(D)

2. 1/12th of the shares shall vest per calendar month following the date of grant with all of such shares vesting on September 19, 2008 provided that the Reporting Person continues his or her service as a director through such date.

Date Exercisable

(2)

(3)

Expiration Date

09/19/2015

(4)

Title

Stock

Commor

Stock

- 3. The shares of common stock shall vest upon the one year anniversary of the date of grant (or September 19, 2008), provided that the Reporting Person continues his or her service as a director through such date and further subject to the terms and conditions of the restricted stock unit agreement.
- 4. Not applicable.

Stock Option (Right to Buy)<sup>(1)</sup>

Restricted

Stock

Units<sup>(1)</sup>

Gil M. Labrucherie, Attorneyin-Fact 09/21/2007

\*\* Signature of Reporting Person

of Shares

15,000

5,000

\$8.81

\$0.01

Date

15,000

10,000

D

D

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

 $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

09/19/2007

09/19/2007

\*\* 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.