SEC For	m 4 FORM 4	4 U	NITE	D STAT	ES S	SEC	URITIE	S AN	ID E	XCHAN	GE C	OMN	/ISSIO	N		
						Washington, D.C. 20549							[OMB APPROVAL	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).			STA		IT OF CHANGES IN BENEFICIAL OWN pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940								RSHIP	Estim	Number: ated average bur per response:	3235-0287 den 0.5
1. Name and Address of Reporting Person [*] Labrucherie Gil M					2. Issuer Name and Ticker or Trading Symbol <u>NEKTAR THERAPEUTICS</u> [NKTR]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Context (Specify			
(Last) (First) (Middle) C/O NEKTAR THERAPEUTICS 455 MISSION BAY BOULEVARD SOUTH					3. Date of Earliest Transaction (Month/Day/Year) 05/17/2021								A below) below) SVP, COO & CFO			
(Street) SAN FRANCISCO CA 94158			4158		Line) X Form								r Joint/Group Filing (Check Applicable n filed by One Reporting Person n filed by More than One Reporting on			
(City) (State) (Zip)																
		Table	I - No	n-Deriva	tive S	Secur	ities Acq	uired	, Dis	posed of,	or Bei	nefici	ally Own	ed		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					y/Year) if any		eemed ition Date, h/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			Benefi	ies ially Following	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			(11150. 4)	
Common Stock 05/17/2					2021			S		7,898(1)	D	\$ <mark>18</mark> .	3 ⁽²⁾ 25	1,098 ⁽³⁾	D	
		Tal	ble II -							osed of, c onvertibl				d		
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Executi rity or Exercise (Month/Day/Year) if any			emed ion Date, /Day/Year)	Date, Transaction Code (Instr		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5	6. Date Exercisable and Expiration Date (Month/Day/Year)			Amount of D Securities S		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)

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.

(A) (D)

Date

Exercisable

Expiration Date

2. This transaction was executed in multiple trades at prices ranging from \$17.95 to \$18.79. 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. 3. This number includes 997 shares held by the reporting person in the Issuer's 401(K) plan and 4,218 shares held by the reporting person in the Issuer's ESPP plan. The acquisition of these shares under

3. This number includes 99/ shares held by the reporting person in the Issuer's 401(K) plan and 4,218 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:



Fact

** Signature of Reporting Person Date

Amount or Number

of

Shares

Title

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).

Code

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.