FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
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

OMB APPROVAL											
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Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

1(c). S	ee Instruction 1	0.																	
						2. Issuer Name and Ticker or Trading Symbol NEKTAR THERAPEUTICS [ NKTR ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
KOBIN HOWARD W											-	-		1	Direc			10% Ov	·
(Lact)	/Fi	ret) (N	Middle)		<u> </u>									1	Officer (give title below)			Other (s	specify
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 08/19/2024								President & CEO					
C/O NEKTAR THERAPEUTICS 455 MISSION BAY BLVD SOUTH						00/13/2024													
455 MIS																			
(Street)					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
SAN			44.50											Line)	Line)  Form filed by One Reporting Person				
FRANCI	ISCO CA	A 9	4158										Form filed by More than One Reporting						
															Perso				
(City)	(St	ate) (Ž	Zip)																
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	uired	, Dis	posed of	, or E	Bene	ficiall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)					Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				4 and Securit		ties Following (I	Form (D) or	o. Ownership form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount	(A) (D)	or P	rice	Transa	saction(s) r. 3 and 4)			(11150.4)
Common Stock 08/19/2						024			S		14,881(1)	D	\$	1.28(2)	84	348,358		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)	rivative Conversion Date Exe curity or Exercise (Month/Day/Year) if ar					ransaction code (Instr. )		mber rative rities ired r osed ) : 3, 4	6. Date Expira (Month	tion D		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of crivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	(A)	(D)	Date Eversion	ablo	Expiration	Title	Amor or Numl of	per							

## **Explanation of Responses:**

- 1. Represents the number of shares sold by the reporting person to cover required tax withholding obligations in connection with the vesting of the RSUs held by the reporting person and does not represent a discretionary trade by the reporting person.
- 2. This transaction was executed in multiple trades at prices ranging from \$1.24 to \$1.32. 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 the request to the SEC staff, the Issuer, or a security holder of the Issuer.

Mark A. Wilson, Attorney-in-08/20/2024 **Fact** 

\*\* 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.