(City)

Instruction 1(b).

FORM 4

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

(State)

(Zip)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
hours per response	: 0.5						

			or Section 30(ff) or the investment Company Act of 1940				
I. Name and Address of Reporting Person* Zalevsky Jonathan			2. Issuer Name and Ticker or Trading Symbol NEKTAR THERAPEUTICS [NKTR]		ationship of Reporting Pe k all applicable) Director Officer (give title	10% Owner Other (specify	
(Last) (First) (Middle) C/O NEKTAR THERAPEUTICS 455 MISSION BAY BOULEVARD SOUTH		TICS	3. Date of Earliest Transaction (Month/Day/Year) 08/16/2021		Chief R&D Officer		
Street) SAN FRANCISCO	CA	94158	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indir Line) X	vidual or Joint/Group Fili Form filed by One Re Form filed by More th Person	porting Person	

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	(D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	08/16/2021		S		7,662(1)	D	\$13.83(2)	212,803 ⁽³⁾	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 6. Date Exercisable and 1. Title of 3. Transaction 3A. Deemed 5. Number 7. Title and 8. Price of 9. Number of 11. Nature Expiration Date (Month/Day/Year) Conversion Date (Month/Day/Year) or Exercise Price of Derivative Derivative Security (Instr. 3) Code (Instr. 8) Securities Security (Instr. 5) Securities Form: Beneficial Direct (D) (Month/Day/Year) Underlying Derivative Securities Beneficially Ownership Acquired Owned (Instr. 4) (A) or Disposed of (D) (Instr. 3, 4 (I) (Instr. 4) Security Security (Instr. Following 3 and 4) Reported Transaction(s) (Instr. 4) and 5) Amount Number Date Expiration (A) (D) Exercisable Date Shares Code

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 \$13.69 to \$14.32. 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 request to the SEC staff, the issuer, or a security holder of the issuer
- 3. Since the date of the last ownership report of the reporting person, he transferred 14,600 shares of NKTR common stock to his ex-spouse pursuant to a domestic relations order. The reporting person no longer reports as beneficially owned any securities owned by his ex-spouse.

Remarks:

Mark A. Wilson, Attorney-in-

08/18/2021

** 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.