FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
l	OMB Number:	3235-0287							
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l	hours per response:	0.5							

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

1. Name and Address of Reporting Person* Ajer Jeffrey Robert							2. Issuer Name and Ticker or Trading Symbol NEKTAR THERAPEUTICS [NKTR]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Ajer Jerriey Kobert																or		10% Ov	ner	
(Last) (First) (Middle) 105 DIGITAL DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 09/19/2017									Officer below)	(give title		Other (specify below)		
		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable								
(Street)															e) X Form filed by One Reporting Person					
NOVATO CA 94949															Form filed by More than One Reporting					
(City) (State) (Zip)															Persor	Person				
		Tab	le I - Nor	n-Deriv	vativ	e Se	curities	s Ac	quired,	Dis	posed o	f, or E	Benef	ficiall	y Owned					
1. Title of Security (Instr. 3) 2. Trans Date (Month/I						2A. Deer Execution Day/Year) if any (Month/E			Code (Transaction Disposed Code (Instr. 5)		ities Acq d Of (D)	uired (Instr. 3	A) or 3, 4 and		es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)		Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)	
Common	Stock ⁽¹⁾		9/201	/2017 (2)		A		13,500 A		A	\$0.00	13	13,500		D					
Common	Stock ⁽¹⁾	09/19/2017 (3) A 9,000 A \$0.00 22,500 D							D											
		-	Table II -						uired, D						Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date,	4. Transa Code (8)		5. Number		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershij (Instr. 4)	
					Code	v	(A)		Date Exercisab		Expiration Date	Title	or Nu of	umber						
Stock Option	\$21.75	09/19/2017			A		33,750		(4)	0	9/18/2025	Comm		3,750	\$0.00	33,750)	D		
Stock Option	\$21.75	09/19/2017			A		22,500	П	(5)	0	9/18/2025	Comm		2,500	\$0.00	22,500)	D		

Explanation of Responses:

- 1. This stock award was acquired pursuant to a grant of restricted stock units ("RSUs"). Each RSU represents a contingent right to receive, upon vesting of the unit, one share of the issuer's common stock.
- 2. This restricted stock unit award vests over three years in equal annual installments beginning on September 19, 2017.
- 3. This restricted stock unit award vests in full, one year following September 19, 2017.
- 4. This stock option vests in equal monthly installments over the three-year period beginning on September 30, 2017.
- 5. This stock option vests in equal monthly installments over the one-year period beginning on September 30, 2017.

Remarks:

Mark A. Wilson, Attorney-in-

<u>Fact</u>

** Signature of Reporting Person

09/21/2017

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.