## Edgar Filing: Nicholson John - Form 4

Form 4											
February 20, 2018 FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
		URITIES AND EXCHANGE COMMISSIC Washington, D.C. 20549					OMB Number:	3235-0287			
Check thi if no long subject to Section 10 Form 4 or Form 5 obligation	F CHANGES IN BENEFICIAL OWN SECURITIES Section 16(a) of the Securities Exchange Public Utility Holding Company Act of					e Act of 1934,	Expires: January 3 200 Estimated average burden hours per response 0.				
may conti <i>See</i> Instru 1(b).	inue.	· · /		vestment	U	· ·					
(Print or Type R	Responses)										
1. Name and A Nicholson Jo	2. Issuer Name <b>and</b> Ticker or Trading Symbol NEKTAR THERAPEUTICS [NKTR]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
	(First) AR JTICS, 455 MI LEVARD SOU		3. Date of (Month/D 02/16/20	-	ansaction			Director X Officer (give below) SVP & Chi			
				4. If Amendment, Date Original Filed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
SAN FRAN	CISCO, CA 94	158						Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Execution any		3. Transactic Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	02/16/2018			S	4,879 (1)	D	\$ 82.94 (2)	387,657	D		

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

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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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	of (Month/				unt of rlying rities	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
Repo	rting C	)wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
Nicholson John C/O NEKTAR THERAPEUTICS 455 MISSION BAY BOULEVARD SOUTH SAN FRANCISCO, CA 94158			SVP & Chief Operating Officer				
Signatures							
Mark A. Wilson,	010						

02/20/2018 Attorney-in-Fact

\*\*Signature of Reporting Person

Nich C/0 4551 SAN

Sig

## **Explanation of Responses:**

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).

Date

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 (1) 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.

This transaction was executed in multiple trades at prices ranging from \$81.57 to \$84.00. 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 (2) which the transactions were effected upon request to the SEC staff, the issuer, or a security holder of the issuer.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.