Edgar Filing: Labrucherie Gil M - Form 4

Labrucherie Gil M Form 4 June 12, 2009						
FORM 4 UNITED					PPROVAL	
UNITED		URITIES AND EXCHANGE Vashington, D.C. 20549	E COMMISSION	OMB Number:	3235-0287	
if no longer subject to Section 16. Form 4 or Form 5 Filed put	subject to Section 16. Form 4 or Form 5 obligations may continue. See InstructionSTATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESEstimated average burden hours per responseSite Artement of Changes in Beneficial Ownership Section 16. Form 5 obligations may continue. See InstructionEstimated average burden hours per response					
(Print or Type Responses)						
1. Name and Address of Reporting Labrucherie Gil M	Symbo NEK	2. Issuer Name and Ticker or Trading 5. Relation Symbol Issuer NEKTAR THERAPEUTICS [NKTR]		ship of Reporting Person(s) to (Check all applicable)		
(Last) (First) (C/O NEKTAR THERAPEUTICS, 201 INDUSTRIAL ROAD	(Month	3. Date of Earliest Transaction Director (Month/Day/Year) XOfficer (give below) 06/10/2009 SVP &			10% Owner title Other (specify below) General Counsel	
(Street) SAN CARLOS, CA 94070	Filed(Month/Day/Year) Applicable Lin _X_Form file			Joint/Group Filing(Check y One Reporting Person y More than One Reporting		
(City) (State)	(Zip) Te		Person			
	- 14	able I - Non-Derivative Securities A	• • •		•	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price	Securities I Beneficially (Owned (Following (Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Report on a separate line	e for each class of se	ecurities beneficially owned directly	or indirectly.			

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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)	5. Number of orDerivative Securities Acquired (A) of Disposed of (D (Instr. 3, 4, and 5))	Date	7. Title and Underlying (Instr. 3 and	Securities
				Code V	(A) (E) Date Exercisable	Expiration Date	Title	Amount Number Shares
Employee Stock Option	\$ 6.34	06/10/2009		А	175,000	(1)	06/10/2018	Common Stock	175,00

Reporting Owners

Reporting Owner Name / Address		Relationships			
		irector	10% Owner	Officer	Other
Labrucherie Gil M C/O NEKTAR THERAPEUTICS 201 INDUSTRIAL ROAD SAN CARLOS, CA 94070				SVP & General Counsel	
Signatures					
Gil M.					
Labrucherie	06/12/200	9			
**Signature of	Date				

**Signature of Reporting Person

Date

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).
- (1) $\frac{25\%}{100}$ of the shares subject to the employee stock option vest on the one year anniversary of the grant date (or June 10, 2010) and the remainder of the shares vesting monthly on a pro rata basis over the following three years.

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.