FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB API	PROVAL
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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 Number: 3235-02											
	Estimated average burden											
	0.5											
L												
of R cabl	eporting Person(s) e)	to Issuer										

Name and Address of Reporting Person* CHALMERS DEREK T					2. Issuer Name and Ticker or Trading Symbol Cara Therapeutics, Inc. [CARA]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
					Cara Therapeuties, Inc. [Chief]								X	Direc	ctor 10% Owi		wner				
(Last)	(F	irst) (Middle)		3. D	Date of Earliest Transaction (Month/Day/Year)										Office below			Other below)	(specify	
C/O CARA THERAPEUTICS, INC.				01/0	01/02/2020										Presider	resident & CEO					
4 STAMFORD PLAZA, 107 ELM ST, 9TH FLOOR																					
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) STAMFORD CT 06902															Line) X Form filed by One Reporting Person						
,——	OKD C	1 (Form filed by More than One Reporting Person							
(City)	(S	tate) (Zip)													1 613	OH				
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Acc	quired	l, Dis	sposed o	f, o	r Bei	nefici	ally O	wne	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,				es Acquired (A) o Of (D) (Instr. 3, 4 a			and 5) Secu Bene Owne		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	A) 1)	A) or D)	Price	1	Reported Transaction(s) (Instr. 3 and 4)				(111501. 4)	
Common Stock 01/02/2					2020			S ⁽¹⁾		10,000 D		D	\$16.0	.05(2) 9		17,769	Ι)			
	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. Deem Execution if any (Month/D	on Date, Tr		ransaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exercion Da /Day/Y		or		f g nstr. 3 nount	Deriva Securi	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	m: ect (D) ndirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Date		Expiration		of	umber										

Explanation of Responses:

- 1. This sale was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on May 23, 2019.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$15.64 to \$16.17, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote to this Form 4.

Remarks:

/s/Darren DeStefano, Attorney-01/06/2020 in-Fact

** Signature of Reporting Person

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.