FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
-------------	------	-------	--

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Instruc	tion 1(b).			Filed							es Exchang npany Act o		of 1934		Lilouis	э рст т		0.5
Name and Address of Reporting Person* Goncalves Joana				2. Issuer Name and Ticker or Trading Symbol Cara Therapeutics, Inc. [CARA]									5. Relationship of Reporting Person(s) to Issu (Check all applicable) Director 10% Own Officer (give title Other (sp				wner	
(Last) (First) (Middle) C/O CARA THERAPEUTICS, INC. 4 STAMFORD PLAZA, 107 ELM STREET, 9TH FL					3. Date of Earliest Transaction (Month/Day/Year) 10/20/2020										below) belo Chief Medical Officer			
					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) STAMFO	ORD C	Γ 0	6902											X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (ž	Zip)															
		Table	I - Nor	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	osed of	, or E	Benefic	ially Ow	ned			
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)				Execution Date,				ies Acquired (A Of (D) (Instr. 3,		and Secu Bene	ficially ed Following	Forr (D) (n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							Code	v	Amount	(A) (D)	or Pric	Trans	Transaction(s) (Instr. 3 and 4)			(11341.4)		
Common Stock 10/20				/2020		S ⁽¹⁾		2,000 D) \$:	15	33,373		D				
		Tal									osed of, onvertib				ed			
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	on Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)		te	7. Titl Amou Secur Under Derive Secur 3 and	int of rities rlying ative rity (Instr. 4)	8. Price o Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code V		(A) (D)		Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

1. This sale was effected pursuant to a Rule 10b5-1 Trading Plan, as amended, adopted by the Reporting Person.

Remarks:

/s/ Darren DeStefano, Attorney-in-Fact

10/22/2020

** 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.