SEC Form 4 FORM 4 UNITE	D STATES	SECURITIE	S AN	DE	XCHAN	GE C	OMMIS	SSION			
		Washing	ton, D.C	C. 205	49		OMB APPROVAL				
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	Filed pursua	F CHANGE	of the S	ecurit	ies Exchange	_	Es Es	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5			
1. Name and Address of Reporting Person [*] Goncalves Joana		suer Name and Tick a <u>Therapeutic</u>					Relationship of Reporting Person(s) to Issuer Check all applicable) Director 10% Owner Officer (give title Other (specify				
(Last)(First)(Middle)C/O CARA THERAPEUTICS, INC.4 STAMFORD PLAZA, 107 ELM STREEFL	04/0	ate of Earliest Trans 01/2022			· ·		- A below) below) Chief Medical Officer				
(Street) STAMFORD CT 06902	4. If <i>i</i>	Amendment, Date o	f Origina	al File	d (Month/Day	6. Indi Line) X	-,				
(City) (State) (Zip)											
Table I - No	n-Derivative	Securities Acq	uired,	, Dis	posed of,	or Ber	neficially	/ Owned			
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed O 5)			5. Amount of Securities Beneficially Owned Followin	Form: Direct (D) or Indirect	Ownership	
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock 04/01/2			S ⁽¹⁾		1,642	D	\$ 11. 9 1	74,893	D		
Table II -		ecurities Acqu alls, warrants,						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 Date, if any (Month/Day/Year)	4. Transa Code (8)				6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. This sale was effected pursuant to a "sell to cover" arrangement adopted by the Reporting Person in accordance with Rule 10b5-1 on September 6, 2018 to satisfy the tax withholding obligations triggered by the vesting of restricted stock units reported in the Form 4 filed with the Securities and Exchange Commission on April 1, 2021, and does not represent a discretionary trade by the Reporting Person.

Remarks:

<u>/s/ Darren DeStefano,</u> <u>Attorney-in-Fact</u>

04/05/2022

** 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.