

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL	
OMB Number:	3235-0104
Estimated average burden hours per response:	0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>CSL LTD</u>  (Last) (First) (Middle) <u>655 ELIZABETH STREET</u>  (Street) <u>MELBOURNE C3 3000</u> <u>VIC</u>  (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>08/09/2022</u>	3. Issuer Name and Ticker or Trading Symbol <u>Cara Therapeutics, Inc. [ CARA ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director <input checked="" type="checkbox"/> 10% Owner  Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year)
		6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person Form filed by More than One Reporting Person	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock, par value \$0.001 per share	7,396,770	I	See Notes <sup>(1)(2)(3)(4)</sup>

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

**Explanation of Responses:**

- CSL Limited, an Australian public limited company ("CSL"), may be deemed to have a pecuniary interest in securities reported by it on this Form 3 (the "Subject Securities").
- CSL's beneficial ownership of the Subject Securities is being reported solely because CSL may be deemed to beneficially own the Subject Securities as a result of its acquisition, indirectly, of 100% of the equity interests in Vifor Pharma Ltd. ("Vifor Pharma"), and, in turn, 100% of the equity interests in the entity that holds the Subject Securities, Vifor (International) Ltd. ("Vifor (International)"), and 55% of the equity interests in Vifor Fresenius Medical Care Renal Pharma Ltd. ("VFMCRP"), which were indirectly owned by Vifor Pharma, on August 9, 2022. VFMCRP may be deemed to beneficially own 6,221,943 of the Subject Securities as a result of its right to acquire such Subject Securities upon exercise of an option granted to it by Vifor (International).
- (Continued from Footnote 2) As a result of the merger of Vifor Pharma into Vifor Pharma Participations Ltd. ("Vifor Participations") pursuant to a merger agreement, dated May 11, 2023, CSL indirectly owns 100% of the equity interests in Vifor (International) and 55% of the equity interests in VFMCRP through its indirect ownership of 100% of the equity interests in Vifor Participations.
- CSL disclaims any beneficial ownership of any of the Subject Securities, except to the extent of any pecuniary interest therein.

CSL LIMITED, By: /s/ Fiona Mead, Name: Fiona Mead, Title: Company Secretary 07/25/2023

\*\* 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 5 (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.