Instruction 1(b).

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person* <u>CHALMERS DEREK T</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol Cara Therapeutics, Inc. [ CARA ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last) (First) (Middle) C/O CARA THERAPEUTICS, INC. 4 STAMFORD PLAZA, 107 ELM ST, 9TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 02/23/2021							X Officer (give title Other (specify below)  President & CEO						
(Street) STAMF(			6902 Zip)										ne) X Forn Forn	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
		Table	I - No	n-Deriva	tive S	ecur	ities Acq	uired	, Dis	posed of	, or Be	nefic	ally Owr	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Execution Date,				es Acquired (A) or Of (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A) or (D)	Price	Trans	action(s) 3 and 4)			(	
Common Stock 02/.				02/23/2	2021		A		18,750 <sup>(1)</sup>	A	\$0.	00 9	955,343				
Common	Common Stock 02/25/20			021	21 s <sup>(2)</sup> 11,729 D \$19.33 943,614		43,614	D									
	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)	if any	emed ion Date, /Day/Year)	Transaction Code (Instr. 5 Sec. 4 Act Code (		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	rivative derivative curity Securities		rship : t (D) lirect str. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

1. Represents the number of shares that vested under a performance-based restricted stock unit award (the "RSU") based on the Issuer's satisfaction of certain performance criteria of the award. In light of the performance-based vesting conditions of the award, such shares were not reportable under Section 16 until vesting was determined, which occurred on February 23, 2021. The vested shares represents the last possible vesting event of the total number of shares subject to the award.

Exercisable

2. 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 RSUs, and does not represent a discretionary trade by the Reporting Person.

(D)

(A)

## Remarks:

/s/Darren DeStefano, Attorney-in-Fact \*\* Signature of Reporting Person

Amount Number

of Shares

Title

Expiration Date

02/25/2021

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).

Code

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.