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

Vashington,	D.C.	20549	
vasimigton,	D.O.	20040	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed nursuant to Section 16(a) of the Securities Eychange Act of 1034

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

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Name and Address of Reporting Person* Scheiner Zachary				2. Issuer Name and Ticker or Trading Symbol Nkarta, Inc. [NKTX]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
									_ :	X Directo	or		10% Ov	ner			
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/07/2023						Officer below)	(give title		Other (s below)	pecify		
C/O RA CAPITAL MANAGEMENT				4. If Amendment, Date of Original Filed (Month/Day/Year)						6 11	6. Individual or Joint/Group Filing (Check Applicable						
200 BERKELEY STREET, 18TH FLOOR			4. If Americanient, bate of original filed (World bay) fear)							Line)							
											X Form filed by One Reporting Person				n		
(Street)	NT N	IA	02116										Form filed by More than One Reporting Person			rting	
БОЗТО	.N 1V.	IA	02116		Dulo	10bE 1/o	\ Tranc	ooti	on Inc	dicat	tion						
			<i></i>		Rule	10b5-1(c) ITALIS	acıı	OH HIC	Jicai	lion						
(City)	(S	itate)	(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												
		Tab	le I - Nor	n-Deriva	ative S	ecurities Ac	quired,	Disp	osed o	of, oı	Bene	eficial	ly Owned	<u> </u>			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D.			Execution Date,		Transaction Dispos Code (Instr. 5)		Dispose	curities Acquired (A osed Of (D) (Instr. 3,			Securition Benefici Owned I	5. Amount of Securities Beneficially Owned Following		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	t	(A) or (D)	Price Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
		7	able II -	Derivat	ive Sec	curities Acq	uired. D	ispo	sed of	or I	Benef	icially	Owned				
						lls, warrants	,			,		,					
1. Title of Derivative Security 1. Title of Conversion On Exercise (Instr. 3) 2. Conversion Date (Month/Day/Year) 3. Transaction Date Execution Date (Month/Day/Year) 4. Defined Execution Date (Month/Day/Year) 5. Conversion Date (Month/Day/Year) 6. Conversion Date (Month/Day/Year) 6. Conversion Date (Month/Day/Year) 6. Conversion Date (Month/Day/Year)		Date, T	i. Transactio Code (Inst		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	rivative derivative curity Securitie		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
	I	I	_							4	I		1				

Explanation of Responses:

\$4.86

1. All shares subject to the option vest 100% on the first to occur of (i) June 7, 2024 or (ii) the day immediately preceding the first annual meeting of the Issuer's stockholders to occur after the date of grant of the award. Each grant, to the extent outstanding and otherwise unvested, will become fully vested should a "change in control" of the Issuer occur (as described in the applicable award agreement) or upon the Reporting Person's separation from service with the Issuer due to the Reporting Person's death or "disability" (as described in the applicable award agreement).

Date Exercisable

(1)

Remarks:

Stock Option (right to

/s/ Alicia Hager, as Attorney-

Number

Shares

22,500

\$0.00

06/09/2023

22,500

D⁽²⁾

in-Fact

Expiration Date

06/06/2033

Title

Commor Stock

** 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).

06/07/2023

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

A

(A)

22,500

(D)

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.

^{2.} Under the Reporting Person's arrangement with RA Capital Management, L.P. (the "Adviser"), the Reporting Person holds the stock option for the benefit of the RA Capital Healthcare Fund, L.P. (the "Fund") and the RA Capital Nexus Fund, L.P. (the "Nexus Fund"). The Reporting Person is obligated to turn over to the Adviser any net cash or stock received upon exercise of the stock option, which will offset advisory fees owed by the Fund and the Nexus Fund. The Reporting Person therefore disclaims beneficial ownership of the stock option and underlying common stock.