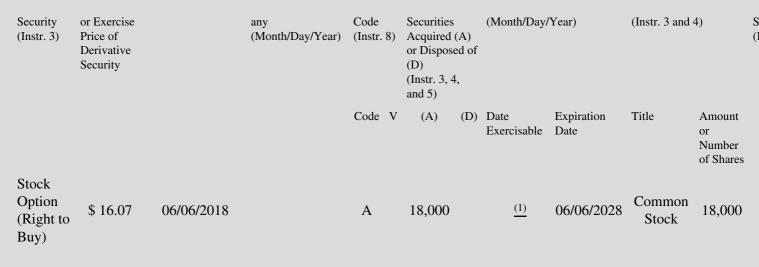
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Ives Jeffrey L. Form 4											
June 08, 2018											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
Washington, D.C. 20549									3235-0287		
Check this bo if no longer								Expires:	January 31, 2005		
subject to Section 16. Form 4 or	S CHANGES IN BENEFICIAL OV SECURITIES				WNERSHIP OF	Estimated burden ho response	average urs per				
Form 5 obligations may continue <i>See</i> Instruction 1(b).	Section 17(a) of the l	Public U	Jtility Ho	lding Coi		nge Act of 1934, t of 1935 or Secti 1940				
(Print or Type Resp	oonses)										
1. Name and Address of Reporting Person <u>*</u> Ives Jeffrey L.			2. Issuer Name and Ticker or Trading Symbol Cara Therapeutics, Inc. [CARA]				5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle)			3. Date of Earliest Transaction				(Check all applicable)				
C/O CARA THERAPEUTICS, INC.,, 4 STAMFORD PLAZA, 107 ELM STREET			(Month/Day/Year) 06/06/2018			X_ Director 10% Owner Officer (give title Other (specify below) below)					
LEWISTREET	4. If Amondment Data Original			6 Individual or Joint/Group Filing(Check							
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line)_X_ Form filed by One Reporting Person					
STAMFORD, CT 06902						Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Tał	ble I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
	'ransaction Date onth/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transactio Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3,	(A) or of (D)	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	or (D) Price	Transaction(s) (Instr. 3 and 4)				
Densinden Denem		f									
Reminder: Report o	on a separate fine	for each ch	ass of sec	unnes bene	Perso inforr requi	ons who re nation con red to resp ays a curre	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
	2 т	r Di	24 5		4	5 N 1					

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Ives Jeffrey L. C/O CARA THERAPEUTICS, INC., 4 STAMFORD PLAZA, 107 ELM STREET STAMFORD, CT 06902	, Х					
Signatures						
/s/Darren DeStefano, Attorney-in-Fact	06/08/2018					
<u>**</u> Signature of Reporting Person	Date					

Explanation of Responses:

- * 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).
- This option was granted to the reporting person pursuant to the issuer's non-employee director compensation policy. The shares(1) underlying the option vest and become exercisable on June 6, 2019, subject to the reporting person's continued service as a director through such date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.