FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

Name and Address of Reporting Person* Shefferman Jesse				2. Issuer Name and Ticker or Trading Symbol Protara Therapeutics, Inc. [TARA]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
21101101		<u>-</u>										X	Direc	tor		10% Ov	vner		
(Last)	(Fi	rst) (N	/liddle)		3. Date of Earliest Transaction (Month/Day/Year)								X	Office	er (give title v)		Other (s below)	specify	
C/O PROTARA THERAPEUTICS, INC.					01/10/2024									CEO and President					
345 PARK AVENUE SOUTH, 3RD FLOOR					4. If <i>A</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														X Form filed by One Reporting Person					on
NEW YO	ORK N	<i>Y</i> 10	0010										Form filed by More than One Reportin Person				orting		
(City)	(St	ate) (Z	ľip)		Rul	Rule 10b5-1(c) Transaction Indication													
						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.													
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Execution Date,		Date,			es Acquired (A) Of (D) (Instr. 3, 4		and Securit Benefic Owned		ties For cially (D) I Following (I) (n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) o (D)	Price	•	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Stock	ck 01/10/		01/10/2	2024)24		F		5,746(1)	D	\$2.	.39	892,867			D		
		Tat								•	osed of, o			•	Owne	d			
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)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		3 and 4	nt of ties ying tive ty (Instr.	Der Sec	3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v			Date Exercisable		Expiration Date		Amount or Number of Shares						

Explanation of Responses:

Remarks:

/s/ Jesse Shefferman

01/12/2024

** Signature of Reporting Person

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.

^{1.} Represents shares withheld by the Issuer to satisfy income tax obligations associated with the vesting of a Restricted Stock Unit Award granted to the Reporting Person on January 10, 2020.