SLC FUIII 4													
FORM 4 UNITE) STATES	SECURITIES Washington	SION	OMB APPROVAL							
Check this box if Section 16. Form obligations may Instruction 1(b).		STAT	Filed purs	DF CHANGES Juant to Section 16(a) of Section 30(h) of the Inv	f the Securitie	ERSH		OMB Number: 3235-0 Estimated average burden hours per response:					
1. Name and Address of Reporting Person [*] Levy Richard S				suer Name and Ticker Stara Therapeuti				tionship of Repo all applicable) Director	Reporting Person(s) to Issuer ble) 10% Owner				
(Last)	(First)	(Middle)		ate of Earliest Transac 07/2024	tion (Month/D	ay/Year)		Officer (give t below)	title Othe below	r (specify w)			
C/O PROTARA THERAPEUTICS, INC. 345 PARK AVENUE SOUTH, 3RD FLOOR				Amendment, Date of 0	Driginal Filed	(Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NEW YORK	NY	10010						Form filed by Person	More than One Re	porting			
(City)	(State)	(Zip)		 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. 									
	Ta	ıble I - Nor	-Derivative	Securities Acqu	uired, Disp	oosed of, or Benefi	cially (Owned					
Date			2. Transaction Date (Month/Day/Yea	2A. Deemed Execution Date, if any (Month/Day/Year)	ate, Transaction Disposed Of (D) (Instr. 3, 4 a Code (Instr. 5)			5. Amount of Securities Beneficially Owned Followin	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			

				Date Month/Day/Ye	ear)	Execution Date, if any (Month/Day/Year)		Code (Instr.		Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following Reported		Form: Direct (D) or Indirect (I) (Instr. 4)		of Indirect Beneficial Ownership (Instr. 4)	
								Code	V Ar	mount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			(Instr. 4)	
	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	xercise (Month/Day/Year) if any Code e of (Month/Day/Year) 8) vative				5. Numl of Derivati Securiti Acquire (A) or Dispose of (D) (I 3, 4 and	ive ies ed ed nstr.	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficial Owned Following Reported	Following Reported Transaction(s)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)		Date Exercisable		ration	Title	Amount or Number of Shares						

(1)

Explanation of Responses:

\$2.67

1. The shares will vest in equal monthly installments over the 12 months following the date of grant, provided that the shares will, in any case, be fully vested on the date of the Company's next annual stockholder meeting, subject to the optionholder's continuous service as a member of the Board through such vesting date and will vest in full upon a Change of Control.

10,000

Remarks:

Stock Option (Right to

Buy)

/s/ Mary Grendell, Attorney-in-06/10/2024 fact

10,000

\$<mark>0</mark>

10,000

D

Common Stock

06/06/2034

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).

06/07/2024

** 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.

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** Signature of Reporting Person Date