FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

\bigcirc	ΛD	AΡ	DD	\sim	/ A I
()1	ЛΚ	AΡ	РΚ	() \	/AI

OMB Number:	3235-0287
Estimated average burden	
l	0.5

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box to indicate that a
transaction was made pursuant to a
contract, instruction or written plan for the
purchase or sale of equity securities of th
issuer that is intended to satisfy the
affirmative defense conditions of Rule
10b5-1(c). See Instruction 10.

Name and Address of Reporting Person* Hyllengren Eric J			2. Issuer Name and Ticker or Trading Symbol Atara Biotherapeutics, Inc. [ATRA]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
l		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/04/2024	X	Officer (give title below)	Other (specify below)		
C/O ATARA BIOTHERAPEUTICS, INC.		INC.			EVP,	CFO		
2380 CONEJO SPECTRUM ST, SUITE 200		ITE 200	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person				
(Street) THOUSAND CA 91320		91320			•	nan One Reporting Person		
(City)	(State)	(Zip)						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Ad Disposed 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	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common Stock	03/04/2024		S ⁽¹⁾		1,462	D	\$0.721(2)	679,536	D	
Common Stock	03/04/2024		S ⁽¹⁾		5,217	D	\$0.72(2)	674,319	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	 3A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Derivative Code (Instr. Securities		6. Date Exerc Expiration Day/\(\text{Month/Day/\}\)	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

Explanation of Responses

- 1. Shares sold automatically to satisfy tax withholding obligations in connection with the vesting of previously granted restricted stock units, pursuant to a sale-to-cover provision in the award agreement.
- 2. The sale price of the reporting person's shares represents the weighted average price of all shares sold by a broker on March 4, 2024 and March 5, 2024 on behalf of a group of employees of the Issuer to satisfy the payment of withholding tax liability of such employees.

/s/ John Chao, Attorney-in-Fact for Eric J. Hyllengren 03/06/2024

** 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).
- ** 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.