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FORM 4

may continue. See Instruction 1(b).

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 the issuer that is intended to satisfy the UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to SECTION Section 16. Form 4 or Form 5 obligations

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

affirmative defen 10b5-1(c). See Ir	se conditions of Rule nstruction 10.			
1. Name and Address of Reporting Person [*] <u>Hyllengren Eric J</u>			2. Issuer Name and Ticker or Trading Symbol Atara Biotherapeutics, Inc. [ATRA]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
(Last)	(First) IOTHERAPEUT	(Middle) TICS, INC.	3. Date of Earliest Transaction (Month/Day/Year) 01/27/2025	Director 10% Owner X Officer (give title Other (specify below) below) EVP, CFO and COO
2380 CONEJO SPECTRUM ST, SUITE 200 (Street) THOUSAND OAKS CA 91320		<u>, </u>	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 Form filed by More than 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)	3. Transac Code (Ir 8)			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5		Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	01/27/2025		A		34,050(1)	Α	\$ <mark>0</mark>	57,442	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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (In 8)	tion	Derivat Securit Acquire or Disp	Derivative Expiratio Securities (Month/D Acquired (A) or Disposed of D) (Instr. 3, 4				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		derivative Securities Beneficially Owned Following Reported	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect 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. These restricted stock units ("RSUs") vest as to 1/8th of the total number of shares (rounded down to the next whole number of shares) on the second Quarterly Vesting Date (as defined below) following January 27, 2025, and as to 1/8th of the total number of shares (rounded down to the next whole number of shares) on the second Quarterly Vesting Date, such that all of the shares subject to the RSUs shall be vested on the last Quarterly Vesting Date, subject to the reporting person's continuous service. "Quarterly Vesting Date" means March 1, May 15, August 15, and November 15 of each year, provided that if such date falls on a weekend or holiday, the Quarterly Vesting Date shall be the first business day after such date.

/s/ John Chao, Attorney-in-Fact for 01/29/2025

 Eric J. Hyllengren
 01/2

 ** 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.