## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
hours per response	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 OF SECURITIES

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

(Print or Typ	e Responses	)																
1. Name and Address of Reporting Person* Fust Matthew K				2. Issuer Name and Ticker or Trading Symbol Atara Biotherapeutics, Inc. [ATRA]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X_Director  10% Owner						
(Last) (First) (Middle) C/O ATARA BIOTHERAPEUTICS, INC., 611 GATEWAY BOULEVARD, SUITE 900				3. Date of Earliest Transaction (Month/Day/Year) 06/08/2021								(	Officer (give	e title below)	Othe	r (specify belo	w)	
(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 Form filed by More than One Reporting Person							
SOUTH S	SAN FRAI	NCISCO, CA 94												illi illed by i	viole than one i	acporting reison		
(City	)	(State)	(Zip)	Table I - Non-Derivative Securities Acqui							ired, Disposed of, or Beneficially Owned							
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	any	eemed ition Date, if	ate, if C	(Instr. 8		( <i>A</i>	4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		of (D) Owner Trans		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		d (	o. Ownership Form: Oirect (D)	7. Nature of Indirect Beneficial Ownership	
							Cod	e	_	Amount	(A) or (D)	Price	or (I)		or Indirect I) Instr. 4)			
Common	Stock		06/08/2021				A		1 (1	1,000	A	\$ 0	44,8	54		1	)	
in this form are not required to respond unless the form displays a currently valid OMB control number.  Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. N f Transaction of I Code Sec r) (Instr. 8) Acc or I of ( (Instr. 8)		5. Numb of Deriv Securities Acquired	Number Derivative curities quired (A) Disposed D) str. 3, 4,		ite Exe	xercisable and		7. Title of Und Securit	le and Amount iderlying rities . 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownersh Form of Derivati Security Direct (I or Indire	(Instr. 4)
				Code	V	(A)	(D)	Date Exerc	cisable	Expira Date	tion	Title		Amount or Number of Shares		(Instr. 4)	(Instr. 4)	)
Non- Qualified Stock Option (Right to Buy)	\$ 13.80	06/08/2021		A		17,500			(2)	06/07	//2031	Com		17,500	\$ 0	17,500	D	

# **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Fust Matthew K C/O ATARA BIOTHERAPEUTICS, INC. 611 GATEWAY BOULEVARD, SUITE 900 SOUTH SAN FRANCISCO, CA 94080	X					

#### **Signatures**

/s/ David Tucker, Attorney-in-Fact	06/09/2021
**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).
- These restricted stock units shall vest on the earlier of June 8, 2022 or the date of the next annual meeting of stockholders, subject to the Reporting Person's continuous service.
- (2) The option shall vest on the earlier of June 8, 2022 or the date of the next annual meeting of stockholders, subject to the Reporting Person's continuous service.

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.