## FORM 4

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

OMB APPROVAL						
OMB Number:	3235-028	7				
Estimated average burden						
nours 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).

#### 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

(Finit of Ty	pe Response	(8)														
1. Name and Address of Reporting Person * Turner Heather D				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					
(Last) (First) (Middle) C/O ATARA BIOTHERAPEUTICS, INC., 611 GATEWAY BOULEVARD, SUITE 900				3. Date of Earliest Transaction (Month/Day/Year) 02/09/2017						X Office	X Officer (give title below) Other (specify below) EVP, General Counsel & Sec.					
(Street) SOUTH SAN FRANCISCO, CA 94080			4. If A	4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form fil	6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City		(State)	(Zip)		То	ble I. Non	. Dos	divetive C		00 1 00	uinad Dian	asad of an	Donoficially	Owned		
1 Ti41 CC	· · · · · · · · · · · · · · · · · · ·			Iaa Da									Beneficially		7. Nature	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea		2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	ction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Reported Transaction(s)			Form:	of Indirect Beneficial Ownership	
				(Month	i/Day/Year	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)				(Instr. 4)	
Common	Stock		02/09/2017			S(1)	V	11,582		\$ 15.				D		
Common	Stock		02/09/2017			S(1)		633	D	\$ 16.16	86,142			D		
			Table II		ive Securit ts, calls, wa						ially Owned	1				
1. Title of		3. Transaction		ed 4	1.	5. Numbe	r 6. l	Date Exer	cisable	7.	Title and		9. Number of		11. Natur	
	c Conversion Date or Exercise (Month/I		Execution (Year) any		Γransaction Code			•		mount of nderlying		Derivative Securities	Ownersh Form of	ip of Indirect Beneficia		
(Instr. 3)	Price of		(Month/Da			Securities		- · · · · · · · · · · · · · · · · · · ·			ecurities		Beneficially Owned Following Reported Transaction(s (Instr. 4)	Derivativ	ve Ownersh	
	Derivative Security					Acquired (A) or				4)	•			Security: Direct (I		
						Disposed of (D)								or Indire	ct	
						(Instr. 3, 4, and 5)								(Instr. 4)		
				-		4, and 3)					Amount					
							Da	te	Expira	tion	or itle Number					
					Code V	(A) (D)		ercisable	Date		of Shares					
Repor	ting O	wners														
R	eporting Ov	vner Name /	Address					ships								
				Director	Director 10% Owner Officer						Other					
611 GAT	RA BIOT EWAY BO		TICS, INC. D, SUITE 900 CA 94080			EVP	, Ge	neral Co	unsel	& Sec	2.					

# Signatures

/s/ Tina Gullotta, Attorney-in-Fact for Heather D. Turner	02/10/2017
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).
- (1) Transaction pursuant to Rule 10b5-1 Plan adopted September 23, 2016.

- (2) The price in Column 4 is a weighted average sale price. The prices actually received ranged from \$15.15 to \$16.10. The reporting person will provide to the issuer, any security holder of the issuer, or the SEC staff, upon request, information regarding the number of shares sold at each price within the range.
- (3) The price in Column 4 is a weighted average sale price. The prices actually received ranged from \$16.15 to \$16.20. The reporting person will provide to the issuer, any security holder of the issuer, or the SEC staff, upon request, information regarding the number of shares sold at each price within the range.

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.