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

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

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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

1. Name and Address of Reporting Po Koppikar Utpal	2. Issuer Name a Atara Biothera			0,		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last)(First)(Middle)C/O ATARA BIOTHERAPEUTICS,3. Date of Earliest Transaction (Month/Day/Year)INC., 611 GATEWAY BOULEVARD,08/16/2022SUITE 900900					X_Officer (give title below)Other (specify below)Other (s					
(Street) SOUTH SAN FRANCISCO, 0	4. If Amendment,	Date Origin	nal F	iled(Month/	Day/Yea	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm 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)	ty 2. Transaction Date 2A. Deemed 3. Transaction 4. Securities Acquire Execution Date, if Code (A) or Disposed of ((Instr. 8) (Instr. 3, 4 and 5)			d of (D)	5. Amount of Securities 6. 7. Na Beneficially Owned Following Ownership of Inc Reported Transaction(s) Form: Beneficially (Instr. 3 and 4) Direct (D) Owner					
		(Hohal Day) Four)	Code	v	Amount	(A) or (D)	Price	(linki, 5 dild 1)	or Indirect (I) (Instr. 4)	*
Common Stock	08/16/2022		S ⁽¹⁾		5,940	D	\$ 5.035 (2)	197,589	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless

SEC 1474 (9-02)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, cans, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	:	5.		6. Date Exer	cisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on 1	Numb	ber	and Expirati	on Date	Amount of Der		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	(of	f (Month/Day/Year) U		Unde	rlying	Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)]	Deriv	vative		Securities		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative						curities ((Instr. 3 and			Owned	Security:	(Instr. 4)	
	Security				4	Acqui	ired			4)			0	Direct (D)	
						(A) 01							1	or Indirect	
					Disposed							Transaction(s)			
						of (D)							(Instr. 4)	(Instr. 4)	
						(Instr. 3,									
					4	4, and	and 5)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Excicisable	Dute		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Koppikar Utpal C/O ATARA BIOTHERAPEUTICS, INC. 611 GATEWAY BOULEVARD, SUITE 900 SOUTH SAN FRANCISCO, CA 94080			Chief Financial Officer					

Signatures

/s/ David Tucker, Attorney-in-Fact for Utpal Koppikar	08/18/2022
**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) Shares sold pursuant to a 10b5-1 arrangement to satisfy tax obligations in connection with the vesting of previously granted restricted stock units.
- (2) The sale price of the reporting person's shares represents the weighted average price of all shares sold by a broker on August 16, 2022 on behalf of a group of employees of the Issuer to satisfy the payment of withholding tax liability of such employee.

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.