## FORM 4

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

OMB APPR	OVAL
OMB Number:	3235-0287
Estimated average	burden
nours per response	e 0.5

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., 701 GATEWAY BOULEVARD, SUITE 200 (Street) SOUTH SAN FRANCISCO, CA 94080			3. Date of Earliest Transaction (Month/Day/Year) 11/16/2015						Officer (give title below) Other (specify below)						
			4. If Amendment, Date Original Filed(Month/Day/Year)						_X_	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)		Т	ble I - No	n-Derivat	ive Secu	ities Ac						
1.Title of Security (Instr. 3)			Transaction Date Month/Day/Year)	any	Deemed ecution Date, if	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		red 5. A (D) Ber Rep	Reported Transaction(s)		lowing (	6. Ownership Form:	Beneficial
				(Month/Day	y/Year)	Code	V Ar	nount (A	or O) Pr	rice	str. 3 and	3 and 4) Direct (D) or Indirect (I) (Instr. 4)		r Indirect	Ownership (Instr. 4)
Common S	Stock		1/16/2015			M	1,	602 A	\$ ( (1)	11()	,683		]	)	
Reminder: R	Leport on a se	eparate line for ea	ch class of securiti	es beneficial	ly own	ed directly	Persons contain	who re	form	are no	t require	on of infored to respond	ond unless		474 (9-02)
Reminder: R	Leport on a se	eparate line for ea	ch class of securiti	es beneficial	ly own	ed directly	Persons contain	who re	form	are no	t require	d to resp	ond unless		474 (9-02)
	2. Conversion or Exercise Price of Derivative Security	3. Transaction	Table II - I ( 3A. Deemed Execution Date	Derivative S e.g., puts, ca 4. , if Transact Code	ecuriti ills, wa 5. tion of Do Se Ao	es Acquir- rrants, op Number erivative ecurities equired	Persons containe form dis ed, Dispos tions, con	who reserved in this splays a sed of, or exertible servisable attion Date	Benefic ecuritie 7. T Am Und Sec	are not ntly vali cially O	t require id OMB	ed to respondent of the control number of the control of the contr	9. Number o Derivative Securities Beneficially Owned Following	f 10. Ownersh Form of Derivati Security Direct (I	11. Natur of Indire Beneficis Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II - I  ( 3A. Deemed Execution Date r) any	Derivative S e.g., puts, ca 4. , if Transact Code	scouriti ills, wa 5. sion of Do ) Se Ad (A Di of (II	es Acquir rrants, op Number erivative ecurities equired	Persons contain form dis ed, Dispos tions, con 6. Date Ex and Expira	who reserved in this splays a sed of, or exertible servisable attion Date	Benefic ecuritie 7. T Am Und Sec	cially Offices) Title and nount of derlying curities	t require id OMB	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned	f 10. Ownersh Form of Derivati' Security Direct (I or Indire	11. Natur of Indire Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II - I  ( 3A. Deemed Execution Date r) any	Derivative S e.g., puts, ca 4. , if Transact Code	scouriti ills, wa 5. sion of Do ) Se Ad (A Di of (II	es Acquir rrants, op Number erivative ccurities equired ) or sposed (D) sstr. 3, 4, d 5)	Persons contain form dis ed, Dispos tions, con 6. Date Ex and Expira	who re- ed in this eplays a  sed of, or evertible e ercisable tition Date ay/Year)	Benefic ecuritie 7. T Am Und Sec (Ins	are not ntly valided in the circles of the circles	t require id OMB	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Ownersh Form of Derivati Security Direct (I or Indire	11. Natur of Indire Beneficia Ownersh (Instr. 4)

#### **Reporting Owners**

B. C. N. /All	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Fust Matthew K C/O ATARA BIOTHERAPEUTICS, INC. 701 GATEWAY BOULEVARD, SUITE 200	X					
SOUTH SAN FRANCISCO, CA 94080						

### **Signatures**

/s/ Tina Gullotta, Attorney-in-Fact for Matthew K. Fust	11/18/2015
**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 issued upon settlement of vested restricted stock units.
- (2) Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock or a cash settlement.

The restricted stock units ("RSUs") were granted with both (a) a liquidity event-based vesting condition and (b) a service-based vesting condition, both of which conditions must be satisfied in order for the RSUs to vest. The liquidity event-based condition was satisfied upon the closing of the Issuer's initial public offering (the "IPO"). The shares that vested on the closing date of the IPO, and the shares that vested thereafter through May 15, 2015, were settled on May 15, 2015. The service-based vesting condition provides that

25% of the total number of shares on March 14, 2015 and 1/48th of the total number of shares monthly thereafter, subject to the holder's continuous service through each such date.

(4) The earlier of (i) March 27, 2021 or (ii) the recipient's termination date.

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.