FORM 4

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

OMB APPROVAL					
DMB Number:	3235-0287				
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ours per respon	se 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

	pe Response			1										
Name and Address of Reporting Person * Ciechanover Isaac E.			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) 611 GATEWAY BOULEVARD, SUITE 900			3. Date of Earliest Transaction (Month/Day/Year) 12/12/2018					X Officer (give title below) Other (specify below) Chief Executive Officer						
(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				cable Line)		
SOUTH SAN FRANCISCO, CA 94080 (City) (State) (Zip)			Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
				2A. Deemed	1								6.	7. Nature
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		Execution Date, if any	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Beneficially Owned Following Reported Transaction(s)			Ownership of Form:	of Indirect Beneficial			
		(Month/Day/Year) Code V Amount (D)		Price	or Indirect (I)				Ownership (Instr. 4)					
Common	Stock		12/12/2018		S ⁽¹⁾		3,900	D	\$ 42.56 (2)	23,578		I	See footnote (3)	
Common	Stock		12/13/2018		S(1)		3,900	D	\$ 42.75 (4)	19,678		I	See footnote (3)	
Common	Stock									733,285	5		D	
Reminder:	Report on a	separate line	for each class of sec	urities beneficially	owned dir	ectly (or							
			Table II -	Derivative Securit	ies Acquii	con the	tained i form dis	n this i	form ar a curre	e not req	ection of in juired to re d OMB cor	spond un	less	EEC 1474 (9- 02)
1 7741	l ₂	2 . T		e.g., puts, calls, wa							le p.:c	0. M1	. C 10	11 37.4
Security	Conversion	3. Transactic Date (Month/Day	Execution D (Year) any	4. Transaction Code (Instr. 8)	of	and Expiration Date (Month/Day/Year) ss d		Am Und Sec	urities (Instr. 5) Benefi Owned Follow Report Transa (Instr			Owners Form o y Derivat Security Direct (or Indir	Ownershi y: (Instr. 4) (D)	
				Code V	(A) (D		te ercisable	Expirat Date	tion Title	Amount or e Number of Shares				

Reporting Owners

Daniel Company (Adding			Relationships					
Reporting Owner Name / Address		Director 10% Owner		Officer	Other			
	Ciechanover Isaac E. 611 GATEWAY BOULEVARD SUITE 900 SOUTH SAN FRANCISCO, CA 94080	X		Chief Executive Officer				

Signatures

/s/ David Tucker, Attorney-in-Fact for Isaac E. Ciechanover	12/13/2018
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 January 23, 2018.
- (2) The price in Column 4 is a weighted average sale price. The prices actually received ranged from \$42.17 to \$43.16. 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) Shares are held by the Isaac E. Ciechanover and Allison M. Ciechanover Family Trust dated 8/8/08, of which the Reporting Person is a trustee.
- The price in Column 4 is a weighted average sale price. The prices actually received ranged from \$42.48 to \$42.96. 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.