FORM 4

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

OIVIB APPROVAL					
OMB Number:	3235-0287				
Estimated average but	rden				
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

I. Name and Address of Reporting Person *- Roncarolo Maria Grazia (Last) (First) (Middle) C/O ATARA BIOTHERAPEUTICS, INC., 611 GATEWAY BOULEVARD, SUITE 900 (Street) SOUTH SAN FRANCISCO, CA 94080				2. Issuer Name and Ticker or Trading Symbol Atara Biotherapeutics, Inc. [ATRA]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)XDirector10% Owner					
				Date of Earliest Transaction (Month/Day/Year) 05/11/2020 4. If Amendment, Date Original Filed(Month/Day/Year)							Officer (give title below) Other (specify below)				
										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)
SOUTH S (City		(State)	(Zip)			Tal	ble I	Non Donis	ativo Comultio	a A aquinad	Dianagad	of or Dono	Gaially Own	d	
1.Title of Security 2. Transaction Date			2A. Deemed Execution Date, if		ate, if Co	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				neficially	6. Ownership Form: 7.	7. Nature of Indirect Beneficial Ownership	
				(Monas Bay)				e V Aı	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
									orm are not re				form		
Derivative Security	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if	4. Transac Code	ts, ca	lls, warra 5. Numb	er ative es	displays ired, Dispos options, cor 6. Date Exe Expiration I (Month/Day	sed of, or Beneral exertible securing the control of the control o	valid OMB ficially Ow ties)	ned d Amount	8. Price of	9. Number o Derivative Securities Beneficially Owned Following	f 10. Ownersh Form of Derivativ Security: Direct (D	Beneficia Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	ts, ca	5. Numb of Deriva Securitie Acquired or Dispos	er ative es d (A) sed	displays ired, Dispos options, cor 6. Date Exe Expiration I (Month/Day	sed of, or Bene exertible securities and Date //Year)	ficially Owties) 7. Title an of Underly Securities	ned d Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned	Ownersh Form of Derivativ Security: Direct (D or Indirect	of Indire Beneficia Ownersh (Instr. 4)

Reporting Owners

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

Signatures

/s/ David Tucker, Attorney-in-Fact	05/12/2020
**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) $\frac{1}{3}$ rd of the shares will vest on the first, second and third anniversaries of the grant date, subject to the Director's Continuous Service (as defined in the Plan).

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.