FORM 4

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

OMB APPROVAL						
OMB Number:	3235-0287					
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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

(Print or Ty	pe Response	s)												1						
Name and Address of Reporting Person* Murugan Amar				2. Issuer Name and Ticker or Trading Symbol Atara Biotherapeutics, Inc. [ATRA]								Dire	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) 08/17/2021							y/Year)	X_Off	X Officer (give title below) Other (specify below) SVP, GC & Secretary							
SOUTH SAN FRANCISCO, CA 94080				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form	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 Acqui							Securit	quired, Dis	posed of, or l	Beneficially	Owned				
1.Title of Security (Instr. 3)		Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)			Code (Instr. 8)		tion	4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		of (D) Benefic	unt of Securities ially Owned Following d Transaction(s) and 4)		Ownership Form:	7. Nature of Indirect Beneficial Ownership			
					(Monal Bay, Tour)		,	Co	de	v	Amount	(A) or (D)	Pric	Ì	or I (I) (In:			(Instr. 4)		
Common Stock 08/17/2021				SC	<u>1)</u>		2,080	D	\$ 12.53 (2)	32 89,66	89,664		D							
Reminder:	Report on a s	separate line f	for each cl	lass of secur	ities be	eneficial	ly ov	wned o		Person	sons wha	no resp n this t	form	are not re	ection of inf quired to res d OMB con	spond unle	ess	1474 (9-02)		
				Table II - I							Disposed of s, conver			•	d					
Security	2. Conversion or Exercise Price of Derivative Security	Date	Date (Month/Day/Year)	Date Execution (Month/Day/Year) any	Date Execution I Month/Day/Year)	Execution Date of the Day/Year)	Execution Date	4. Transactio Code Year) (Instr. 8)		tion	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7 A U S	T. Title and Amount of Underlying Securities Instr. 3 and	ount of lerlying urities tr. 3 and	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivat Security Direct (or Indir	Beneficia Ownersh (Instr. 4)
						Code	V	(A)	(D)	Dat Exe	~	Expirat Date	tion T	Amour or Number of Shares						

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Murugan Amar								
C/O ATARA BIOTHERAPEUTICS, INC.			SVP, GC & Secretary					
611 GATEWAY BOULEVARD, SUITE 900			SVP, GC & Secretary					
SOUTH SAN FRANCISCO, CA 94080								

Signatures

/s/ Nimit Arora, Attorney-in-Fact for Amar Murugan	08/19/2021
-*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 17, 2021 and August 18, 2021 on behalf of a group of employees of the Issuer to satisfy the payment of withholding tax liability of such employees.

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.