FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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).

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 * Newell Joe					2. Issuer Name and Ticker or Trading Symbol Atara Biotherapeutics, Inc. [ATRA]								5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O ATARA BIOTHERAPEUTICS, INC., 611 GATEWAY BLVD., SUITE 900					3. Date of Earliest Transaction (Month/Day/Year) 08/17/2021								X Officer (give title below) Other (specify below) Chief Operations Officer						
SOUTH	SAN FRA	(Street)	CA 94080	4. If	Amendr	ment,	, Date	Origi	nal F	Filed(Montl	h/Day/Ye	ear)		X_Form file	ed by One Repo	Group Filing rting Person One Reporting		ble Line)	
(City)	(State)	(Zip)		Table I - N				on-Derivative Securities Acqu				cquir	lired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execu			Code (Instr. 8)		tion 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			O)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership Form:	Beneficial			
				(Mon	th/Day/Year)		Coe	de	V	Amount	(A) or (D)	Prio	ce	(Instr. 3 a	and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock 08/1		08/17/2021				SC	<u>1)</u>		2,426	D	\$ 12.5 (2)	532	126,545			D			
Terminaer.	report on a c	oparate inic	for each class of sec	- Deriv	ative Sec	curit	ties Ac	quire	Person the	sons whatained in form dis	no res n this splays	form s a cu Benefi	are irren	not requ		ormation spond unle rol numbe	ss	1474 (9-02)	
	2. Conversion or Exercise Price of Derivative Security	3. Transacti Date (Month/Day	Execution I any	. Deemed ecution Date, if	4. Transaction Code (Instr. 8)		5.		and Expiration Date (Month/Day/Year) A U Se			7. Tit Amou Unde Secur (Instr	cle and unt of rlying rities : 3 and	Derivative Security (Instr. 5)	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		Expira Date	ntion	Title	Amount or Number of Shares					

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Newell Joe C/O ATARA BIOTHERAPEUTICS, INC. 611 GATEWAY BLVD., SUITE 900 SOUTH SAN FRANCISCO, CA 94080			Chief Operations Officer					

Signatures

/s/ Nimit Arora, Attorney-in-Fact for Joe Newell	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.