FORM 4

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

OMB APPROVAL
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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 * Koppikar Utpal					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) 02/07/2022							r)		X Office	er (give title bele Chie	ow) f Financial (Other (specify) Officer	pelow)	
(Street) SOUTH SAN FRANCISCO, CA 94080				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)								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 Acquired, Disposed of, or Beneficially Owned														
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	Execu any	Deemed cution Date, if		Code (Instr. 8)		A. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Following	Ownership Form:	7. Nature of Indirect Beneficial Ownership		
				(Mont	th/Day/Year)				V	Amount	(A) or (D) Pr		rice	(instr. 3	and 4)		Direct (D) or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock		02/07/2022				S ⁽¹)		2,496	D	\$ 14.4 (2)	4615	155,70	2 (3)		D		
Reminder:	Report on a s	separate line	for each class of sec	- Deriv	ative Sec	curit	ties Ac	P c tl	erson on he	sons whatained in form dis	no res n this splay	forr s a c	n are urren	not requ		ormation spond unle rol numbe	ss	1474 (9-02)	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transacti Date (Month/Day	Execution Day (Year) any	d Date, if	· · · · · · · · · · · · · · · · · · ·	tion	5.		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivat Security Direct (or Indir	Benefici Ownersh (Instr. 4)		
					Code	V	(A)		Dat ∃xe	te ercisable	Expir Date	ration	Title	Amount or Number of Shares					

Reporting Owners

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

Signatures

/s/ David Tucker, Attorney-in-Fact for Utpal Koppikar	02/09/2022	
-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.
- The sale price of the reporting person's shares represents the weighted average price of all shares sold by a broker on February 7, 2021 on behalf of a group of employees of the Issuer to satisfy the payment of withholding tax liability of such employees. The prices actually received ranged from \$14.46 to \$14.75, inclusive. 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 on behalf of the group at each price within the range.
- (3) Includes 484 shares purchased under the Issuer's Employee Stock Purchase Plan on November 30, 2021.

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.