## Edgar Filing: Atara Biotherapeutics, Inc. - Form 4

		OMB APPROVAL	
ATES SECURITIES AND EXCHANGE Washington, D.C. 20549	COMMISSION	OMB 3235-0287 Number:	
T OF CHANGES IN BENEFICIAL OV SECURITIES nt to Section 16(a) of the Securities Exchan f the Public Utility Holding Company Act	nge Act of 1934, of 1935 or Sectio	Expires:January 31, 2005Estimated average burden hours per response0.5	
Symbol	Issuer	f Reporting Person(s) to	
e) 3 Date of Farliest Transaction	(Chec	ck all applicable)	
(Month/Day/Year)	Director X Officer (give below) VP, Gene	e title 10% Owner below) eral Counsel & Sec.	
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		
	Person	Aore than One Reporting	
Table I - Non-Derivative Securities A	cquired, Disposed of	f, or Beneficially Owned	
cution Date, if TransactionAcquired (A) or Code Disposed of (D)	SecuritiesFBeneficially(Owned(	6. Ownership Form: Direct D) or Indirect I) Ovnership Instr. 4) 7. Nature of Indirect Beneficial Ownership Instr. 4) 7. Nature of Beneficial Ownership	
	Washington, D.C. 20549         ST OF CHANGES IN BENEFICIAL ON SECURITIES         Int to Section 16(a) of the Securities Exchanged of the Public Utility Holding Company Act 30(h) of the Investment Company Act of 1         on *         2. Issuer Name and Ticker or Trading Symbol Atara Biotherapeutics, Inc. [ATRA]         Atara Biotherapeutics, Inc. [ATRA]         [e)       3. Date of Earliest Transaction (Month/Day/Year)         TCS, 08/03/2015         A If Amendment, Date Original Filed(Month/Day/Year)         Table I - Non-Derivative Securities A Securities         cution Date, if       TransactionAcquired (A) or Code Disposed of (D) onth/Day/Year) (Instr. 8) (Instr. 3, 4 and 5)         (A)	vT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES         nt to Section 16(a) of the Securities Exchange Act of 1934, of the Public Utility Holding Company Act of 1935 or Sectio 30(h) of the Investment Company Act of 1940         on *       2. Issuer Name and Ticker or Trading Symbol       5. Relationship of Issuer         on *       2. Issuer Name and Ticker or Trading Symbol       5. Relationship of Issuer         Atara Biotherapeutics, Inc. [ATRA]       (Chec (Chec Vector)         le)       3. Date of Earliest Transaction (Month/Day/Year)	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Employee Stock Option (Right to Buy)	\$ 56.98	08/03/2015		А	130,000	<u>(1)</u>	08/03/2022	Common Stock	130,00

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Turner Heather D C/O ATARA BIOTHERAPEUTICS, INC. 701 GATEWAY BOULEVARD SOUTH SAN FRANCISCO, CA 94080			VP, General Counsel & Sec.	
Signatures				

/s/ Heather D.	
Turner	03/04/2016
<u>**</u> Signature of Reporting Person	Date
reporting renson	

## **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) 25% of the shares subject to the option vest and become exercisable on July 6, 2016 and 1/48th of the shares subject to the stock option vest and become exercisable each full month thereafter.

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.