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

Atara Biother	rapeutics, Inc.										
Form 4											
January 05, 2	017										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549									OMB Number:	3235-0287	
Check this box							Expires:	January 31,			
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									2005 2005		
	Section 16. SECURITIES							burden hou	Estimated average burden hours per response 0.8		
Form 5								response			
obligation may conti <i>See</i> Instru 1(b).	nue. Section	17(a) of the		ility Hold	ling Com	pany	Act o	f 1935 or Sectio	on		
(Print or Type R	esponses)										
Fust Matthew K Sy				2. Issuer Name <b>and</b> Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
			Atara Bi	otherape	utics, Inc	. [AT	[RA]	(Cheo	ck all applicable	e)	
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction					,	
INC., 611 G.	A BIOTHERA ATEWAY RD, SUITE 90		(Month/Da 01/03/20	-				_X_ Director Officer (give below)		b Owner er (specify	
(Street) 4. I			4. If Amen	. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
				ed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
FRANCISC	O, CA 94080							Feison			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Executio any		3. Transactic Code (Instr. 8) Code V	4. Securi onAcquirec Disposec (Instr. 3, Amount	l (A) c l of (D	))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common	01/02/2017				2,000			10.000	D		
Stock	01/03/2017			А	<u>(1)</u>	А	\$0	19,093	D		

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. Transacti Code (Instr. 8)	Transaction of Derivative Code Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Shares	
Non-Qualified Stock Option (Right to Buy)	\$ 15.08	01/03/2017		А	5,500	(2)	01/03/2024	Common Stock	5,50	

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Fust Matthew K C/O ATARA BIOTHERAPEUTICS, INC. 611 GATEWAY BOULEVARD, SUITE 900 SOUTH SAN FRANCISCO, CA 94080	X				
Signatures					
/s/ Tina Gullotta, Attorney-in-Fact for Matthew K. Fust	01/05/2017				
<b>**</b> 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) These restricted stock units shall vest on June 8, 2017, the date of the Company's annual stockholder meeting, subject to the Reporting Person's continuous service.
- (2) The option shall vest on June 8, 2017, the date of the Company's annual stockholder meeting, subject to the Reporting Person's continuous service.

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.