### Edgar Filing: Turner Heather D - Form 4

| Turner Heath   | er D  |                |                         |  |             |        |                |   |                                       |                        |  |
|--|---|----------------|-------------------------|--|-------------|--------|----------------|---|---------------------------------------|------------------------|--|
| Form 4   |   |                |                         |  |             |        |                |   |                                       |                        |  |
| February 08,   | 2018  |                |                         |  |             |        |                |   |                                       |                        |  |
| FORM   | FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION |                |                         |  |             |        |                |   |                                       | PPROVAL                |  |
| <b>CUNIVI 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION<br>Washington, D.C. 20549 |   |                |                         |  |             |        | OMB<br>Number: | 3235-0287                                 |                                       |                        |  |
| Check this box   |   |                |                         | 8 /  |             |        |                |   | Expires:                              | January 31,            |  |
| if no longe<br>subject to  | STAT  | EMENT O        | F CHAN                  | GES IN I                                   | BENEFI      | CIA    | LOW            | IERSHIP OF                                |                                       | 2005<br>Laverage       |  |
| Section 16   | <b>.</b>  |                |                         | SECURITIES                                 |             |        |                |   | Estimated average<br>burden hours per |                        |  |
| Form 4 or  |   |                |                         |  |             |        |                |   | response 0.5                          |                        |  |
| Form 5<br>obligation   | · · · · · · · · · · · · · · · · · · ·                   | •              |                         |  |             |        | •              | e Act of 1934,                            |                                       |                        |  |
| may contin<br>See Instruct<br>1(b).  | nue. Section  |                | Public Ut<br>of the Inv | •  | •           | · ·    |                | f 1935 or Sectio<br>40                    | on                                    |                        |  |
| (Print or Type R   | esponses)   |                |                         |  |             |        |                |   |                                       |                        |  |
| 1. Name and Address of Reporting Person <u></u> 2. Issuer                                  |   |                |                         | Name <b>and</b> Ticker or Trading          |             |        |                | 5. Relationship of Reporting Person(s) to |                                       |                        |  |
| Turner Heath   | ner D   |                | Symbol                  |  |             |        |                | Issuer                                    |                                       |                        |  |
|  |   |                | Atara Bi                | otherapeu                                  | itics, Inc  | . [A]  | [RA]           | (Che                                      | ck all applicable                     | <i>.</i> )             |  |
| (Last)   | (First)   | (Middle)       | 3. Date of              | Earliest Tra                               | ansaction   |        |                | (Chee                                     | ek an applicable                      | -)                     |  |
|  |   |                | (Month/D                | ay/Year)                                   |             |        |                | Director                                  |                                       | Owner                  |  |
|  | BIOTHERA  | PEUTICS,       | 02/06/20                | )18  |             |        |                | XOfficer (give titleOther (specify below) |                                       |                        |  |
| INC., 611 GA   |   |                |                         |  |             |        |                | · · · · · · · · · · · · · · · · · · ·     | neral Counsel &                       | : Sec.                 |  |
| BOULEVAR   | RD, SUITE 90  | 00             |                         |  |             |        |                |   |                                       |                        |  |
| (Street) 4. If A   |   |                | 4. If Amer              | If Amendment, Date Original                |             |        |                | 6. Individual or Joint/Group Filing(Check |                                       |                        |  |
| Filed(Mon  |   |                |                         | Ionth/Day/Year)                            |             |        |                | Applicable Line)                          |                                       |                        |  |
| SOUTH SAN  | N   |                |                         |  |             |        |                | _X_ Form filed by<br>Form filed by N      |                                       |                        |  |
| FRANCISCO  | D, CA 94080   |                |                         |  |             |        |                | Person                                    |                                       |                        |  |
| (City)   | (State)   | (Zip)          | Table                   | e I - Non-D                                | erivative S | Securi | ties Acc       | uired, Disposed o                         | f, or Beneficial                      | ly Owned               |  |
| 1.Title of   | 2. Transaction  |                |                         | 3.   |             |        | -              | 5. Amount of                              | 6. Ownership                          | 7. Nature of           |  |
| Security   | (Month/Day/Ye   |                |                         |  |             |        | d of           | Securities                                | Form: Direct                          | Indirect<br>Beneficial |  |
| (Instr. 3)   |   | any<br>(Month/ | Day/Year)               | Code (D)<br>(Instr. 8) (Instr. 3, 4 and 5) |             |        |                |   | (D) or<br>Indirect (I)                | Ownership              |  |
|  |   | (1/10/144)     | 5 uj, 1 cui)            | (115411-0)                                 | (11541-0)   | . una  | .,             | Following                                 | (Instr. 4)                            | (Instr. 4)             |  |
|  |   |                |                         |  |             | (A)    |                | Reported                                  |                                       |                        |  |
|  |   |                |                         |  |             | or     |                | Transaction(s) (Instr. 3 and 4)           |                                       |                        |  |
|  |   |                |                         | Code V                                     | Amount      | (D)    | Price          | (Illsu. 5 allu 4)                         |                                       |                        |  |
| Common<br>Stock  | 02/06/2018  |                |                         | F <u>(1)</u>                               | 4,434       | D      | \$<br>35.8     | 81,708                                    | 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)

## **Reporting Owners**

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | 5.<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | Secur | unt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---------------------------------------|---|---------------------|--------------------|-------|--|---|--|
|   |   |   | Code V                                | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |   |  |

# **Reporting Owners**

| <b>Reporting Owner Name / Address</b>  | Relationships |            |                                      |       |  |  |  |
|--|---------------|------------|--------------------------------------|-------|--|--|--|
| <b>x</b> - 5   | Director      | 10% Owner  | Officer                              | Other |  |  |  |
| Turner Heather D<br>C/O ATARA BIOTHERAPEUTICS, INC.<br>611 GATEWAY BOULEVARD, SUITE 900<br>SOUTH SAN FRANCISCO, CA 94080 |               |            | EVP,<br>General<br>Counsel &<br>Sec. |       |  |  |  |
| Signatures   |               |            |                                      |       |  |  |  |
| /s/ David Tucker, Attorney-in-Fact for Heather D.<br>Turner  |               | 02/08/2018 |                                      |       |  |  |  |
| <u>**</u> 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 withheld to cover tax obligation from settlement of vested restricted stock units.

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.