FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasinington,	D.C. 20049	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Greenberg Norman Michael</u>						2. Issuer Name and Ticker or Trading Symbol Atreca, Inc. [BCEL]									tionship of Reporting all applicable) Director Officer (give title		g Pers	son(s) to Iss 10% Ov Other (s	vner	
(Last) C/O ATF	(Last) (First) (Middle) C/O ATRECA, INC., 450 EAST JAMIE COURT						3. Date of Earliest Transaction (Month/Day/Year) 11/10/2020									below) below) Chief Scientific Officer				
(Street) SOUTH SAN FRANCISCO (City) (State) (Zip)					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								. Indivine)	´					
(Oity)	(0			Non-Deri	vativo	Sec	urit	ios Δ	cauire	2d D	lisnosad (of or B	enefici:	ally (Owner	1				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yo			ion	2A. Deemed Execution Date,		d Date,	3. Transaction Code (Instr.		4. Securities Disposed Of	l (A) or	5. Amo Securi Benefi Owned		unt of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	nount (A) or Price			Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Class A Common Stock 11/10/202				020	20			M ⁽¹⁾		4,500	A	\$4.5	6 4		1,500		D			
Class A C	Common St	ock		11/10/2	020				S ⁽¹⁾		4,500	D	\$15.102	28(2)		0				
		Т	able								sposed of , converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed tion Date, h/Day/Year)	4. Transa Code (8)			vative urities uired or oosed O) tr. 3, 4	Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		De Se (In	Price of privative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	, v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amoun or Numbe of Shares	r						
Stock Option (right to	\$4.56	10/19/2020			M			4,500	(3	3)	05/09/2026	Class A Commo)	\$0.00	16,929		D		

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on September 16, 2020.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$15.00 to \$15.47, inclusive. The reporting person undertakes to provide to Atreca, Inc., any security holder of Atreca, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this Form 4.
- 3. 1/4 of the Option vested on 5/2/2017 and 1/48 of the Option vests in equal monthly installments as measured from 5/2/2017. The shares subject to this option are early exercisable, subject to the Issuer's right to repurchase. If applicable, vesting accelerates as provided in, and subject to the terms and conditions of, that certain Executive Employment Agreement between the Issuer and the Reporting Person, as may be amended from time to time.

Remarks:

/s/ Herbert Cross, attorney-infact

11/12/2020

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.