FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
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|-------------|------|-------|--|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------------------|--|--|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: | | | | | | | | | |

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

| Name and Address of Reporting Person* Robinson William Hewitt | | | | 2. Issuer Name and Ticker or Trading Symbol Atreca, Inc. [BCEL] | | | | | | | | ck all app Direc | tor | ng Per | 10% O | wner | | | |
|---|---|----------|---------|---|---|--|----------------------------|------------------|--|------------|------------------------|----------------------|--|---|--|--|-------------------|---------|--|
| (Last) C/O ATF | ` | rst) (M | Middle) | OURT | 3. Date of Earliest Transaction (Month/Day/Year) 05/26/2020 | | | | | | | | | Office below | er (give title r) | | Other (below) | specify | |
| (Street) SOUTH FRANCE | - C | A 9 | 4080 | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Inc Line) X | Form Form | vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) (2 | Zip) | | | | | | | | | | | | | | | | |
| | | Table | I - Nor | า-Deriva | tive S | Secu | rities | Acq | uired, | Disp | oosed of | , or E | Benef | iciall | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | Execution Date | | Date, | Transaction Code (Instr. 5 | | 4. Securities Acquired (ADisposed Of (D) (Instr. 3.5) | | , 4 and Secur Benet | | ities F icially (I d Following (I | | : Direct | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | Code | v | Amount | (A) (D) | (A) or (D) | | Transa | action(s) . 3 and 4) | | | (1130.4) | | |
| Class A Common Stock 05/26/2 | | | | | /2020 | | | S ⁽¹⁾ | | 387 | I |) | \$20 | 20 430,461 | | | D | | |
| | 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. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 4. Transaction Code (Instr. 8) | | Instr. | of Deriv Secu Acqu (A) o Dispo | rities iired r osed) r. 3, 4 | Expiration Date (Month/Day/Year) Date Expiration | | | Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | nt er | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

 $1. \ The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 16, 2020.$

Remarks:

/s/ Herbert Cross, attorney-in-

05/27/2020

fact

** 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.