FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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>Robinson William Hewitt</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol Atreca, Inc. [BCEL] | | | | | | | | | | all app Direc | tor | ng Per | 10% O | wner |
|---|--|--|--|---|--|---|--|---|---|---|--------------|---------------------------------|---|-------|--|---|--|---|--|--|
| (Last) (First) (Middle) C/O ATRECA, INC., 450 EAST JAMIE COURT | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/18/2020 | | | | | | | | | | Officer (give title below) | | Other (spe below) | | specify |
| (Street) SOUTH SAN FRANCISCO CA 94080 | | | |) | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | City) (State) (Zip) | | | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea | | | | ear) E | 2A. Deemed Execution Date, if any (Month/Day/Year | | , T | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a | | | | nd 5) | | 5. Amount of Securities Beneficially Owned Following Reported | | wnership n: Direct or rect (I) tr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | c | ode | v | Amount | (A) ((D) | or 1 | Price | a | | Transaction(s) (Instr. 3 and 4) | | u. 4) | (11150.4) | |
| Class A Common Stock 09/18/2020 | | | | | 0 |) | | | S ⁽¹⁾ | | 5,000 | D | D \$15.0376 ⁽²⁾ | | 6(2) | 398,948 | | | 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) | Derivative Conversion Date Security or Exercise (Month/Day/Year) if | | | Deemed cution Date, ry nth/Day/Year) | 4. Transaction Code (Instr.) 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration | | | Ai Se Ui De Se 3 | 7. Title and Amount of Securities Underlying Derivative Security (Inst 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.
- 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 \$15.16, 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.

Remarks:

/s/ Herbert Cross, attorney-in-

fact

09/22/2020

** 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.