FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB A	APPROVAL

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longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

	pe Responses	/												
	d Address of es Francis I	Reporting Person* Bertram		2. Issuer Name and Ticker or Trading Symbol Adaptimmune Therapeutics PLC [ADAP]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_ Director10% Owner						
	D VICARA	(First) AGE, LOWER SEY, THAME		3. Date of Earliest Transaction (Month/Day/Year) 11/29/2016				Officer (give	title below)	Othe	er (specify below	r)		
OXFORI	OSHIRE, X	(Street) X0 OX9 3QW		4. If Ame	endment, Da	ite Orig	inal Filed(Mo	nth/Day/Year)	_X_	Form filed by C	ne Reporting I	Filing(Check . Person Reporting Person	Applicable Line)	1
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acqu			s Acquired	, Disposed o	of, or Benef	ficially Owne	d			
1.Title of S (Instr. 3)	2. Transaction Date (Month/Day/Yea		2A. Deemed Execution Date r) (Month/Day/Ye			(A	Securities Acqual or Disposed on the str. 3, 4 and 5)	of (D) Own Tran				Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Cod	le V A	mount (A) or (D)	Price				(I) (Instr. 4)	` ,
Reminder:	Report on a s	eparate line for each	class of securities b	eneficially	y owned dir	ectry of	Persons in this f	who respond orm are not restly valid OME	equired to	respond u				474 (9-02)
Reminder:	Report on a s	eparate line for each				-	Persons in this f	orm are not re atly valid OME	equired to 3 control n	respond u umber.				474 (9-02)
	2. Conversion	3. Transaction	Table II 3A. Deemed Execution Date, if	- Derivat (e.g., pu 4. Transact Code	5. Num 5. Num Corrivat Securit Acquire or Disp (D)	es Acq errants, ber of ive es ed (A) osed of	Persons in this financier a currer uired, Disposoptions, color options, color (Month/Day	orm are not rently valid OME sed of, or Benerovertible securing reisable and Date	equired to B control n ficially Own	respond unumber. ned d Amount ing	8. Price of	9. Number of Derivative Securities Beneficially Owned Following	of 10. Ownersh Form of Derivativ Security: Direct (I	11. Natur of Indire Beneficie (Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II 3A. Deemed Execution Date, if any	- Derivat (e.g., pu 4. Transact Code	5. Num Derivat Securit Acquir or Disp	es Acq errants, ber of ive es ed (A) osed of	Persons in this financier a currer uired, Disposoptions, color options, color (Month/Day	orm are not rently valid OME sed of, or Bene evertible securi rcisable and Date //Year) Expiration	ficially Own ties) 7. Title and of Underly Securities	respond unumber. ned d Amount ing	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned	of 10. Ownersh Form of Derivativ Security: Direct (I or Indire	ip of Indire Beneficie Ownersh (Instr. 4)

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Kerr Giles Francis Bertram THE OLD VICARAGE, LOWER GREEN, TOWERSEY, THAME OXFORDSHIRE, X0 OX9 3QW	X				

Signatures

/s/ Giles Francis Bertram Kerr	12/01/2016
**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) The exercise price was converted from GBP0.65 based on the closing midpoint exchange rate for the U.S. dollar on the trading day prior to the date of grant listed in the Financial Times. The actual exercise price will be the pounds sterling amount.

(2) Exercisable as to 72,000 Ordinary Shares on November 29, 2017 and will be exercisable as to the remainder in monthly installments of 9,000 Ordinary Shares on the twenty-ninth of each month from December 29, 2017 through November 29, 2019.

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.