FORM 4

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

ONB APPR	OVAL
OMB Number:	3235-028
Estimated average b	ourden
hours per response	0.1

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 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

<u> </u>	d Address of	Reporting Person*		2. Issu	ier Na	ame and T	Γickeι	or Trading	Svm	bol	5. 1	Relationship o	of Reporting	Person(s) to I	ssuer		
Duncan Barbara Gayle			Issuer Name and Ticker or Trading Symbol Adaptimmune Therapeutics PLC [ADAP]						X	(Check all applicable) _X_ Director 10% Owner							
	PTIMMU	(First) NE THERAPEU LTON PARK	(Middle) UTICS PLC,, 60	3. Date 07/01/			nsacti	on (Month/l	Day/	Year)	_	Officer (give ti	tle below)	Other	(specify below)		
ADDICD	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year) 6. Individual or Joint/Group Filing(C _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			rson													
ABINGD (City	ON, X0 O	X14 4KX (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1.Title of Se (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date		3. Tra	nsaction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		red 5. A (D) Ow Tra	5. Amount of Sec Owned Following Transaction(s)		eficially 6	6. Ownership	7. Nature of Indirect Beneficial	
				(Month/Da		ny/Year)	Co	de V	Amo	(A) or unt (D)			0	r Indirect (Ownership Instr. 4)		
			class of securities b	- Deriva	ative	Securitie	s Acq	Person in this a curre	forr ently osed	who respond m are not red y valid OMB l of, or Benefic ertible securiti	quired to control r cially Ow	respond ur number.	nformatio less the fo	n contained orm displays		474 (9-02)	
Derivative Security	e Conversion Date Execution Date, i or Exercise (Month/Day/Year) any		Execution Date, if	4. 5. Number Transaction Code Securities			er of 6. Date Exercisab Expiration Date (Month/Day/Year d) sed of			able and 7. Tit of Un Secur		nderlying Derivative		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Form of Derivative Security: Direct (D) or Indirect (I)	(Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	r. 4)	
Option to purchase Ordinary Shares	\$ 0.71 ⁽¹⁾	07/01/2021		A		379,788		07/01/20	22	07/01/2031	Ordinar Shares	- 14/9 /XX	\$ 0	379,788	D		

Reporting Owners

	Relationships					
Reporting Owner Name / Address		10% Owner	Officer	Other		
Duncan Barbara Gayle C/O ADAPTIMMUNE THERAPEUTICS PLC, 60 JUBILEE AVE, MILTON PARK ABINGDON, X0 OX14 4RX	X					

Signatures

/s/ Barbara Gayle Duncan	07/02/2021
**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 GBP0.51 based on an exchange rate of \$U.S. 1.3807 to GBP1.00. The actual exercise price will be the pounds sterling amount.

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.