## FORM 4

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

OMB APPRO	VAL
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).

#### 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

(	e Responses	)														
1. Name and Address of Reporting Person* Noble James  (Last) (First) (Middle) C/O ADAPTIMMUNE THERAPEUTICS PLC,, 60 JUBILEE AVENUE, MILTON PARK			Issuer Name and Ticker or Trading Symbol     Adaptimmune Therapeutics PLC [ADAP]     Date of Earliest Transaction (Month/Day/Year)     07/01/2021							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner						
										Officer (give title below) Other (specify below)						
(Street) ABINGDON, X0 OX14 4RX			4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _ Form filed by More than One Reporting Person						
(City	(City) (State) (Zip)					Ta	able I	I - Non-Deriv	ative Securiti	es Acqui	tired, Disposed of, or Beneficially Owned					
1.Title of So (Instr. 3)	1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea		Execution Date, if		if Co		(A (In	(A) or Disposed of (Instr. 3, 4 and 5)				ecurities Beneficially ng Reported		Ownership Form:	Beneficial Ownership	
Reminder: I	Report on a s	eparate line for each	class of securities b	CHCHCIAN	y on neu .			in this fo	who respon	equired	to res	spond un				474 (9-02)
Reminder: I	Report on a s	eparate line for each		[ - Deriva	ative Secu	rities		in this fo a curren uired, Dispos	orm are not re tly valid OME ed of, or Bene	equired 3 contro ficially (	to res	spond un nber.				474 (9-02)
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date	Table II  3A. Deemed Execution Date, if	- Deriva (e.g., p 4. Transact Code	stive Secuuts, calls, 5. Nuion Deriv Secural Acquire or Di (D) (Instr	rities warramber of ative ities ared (Asposed 3, 4,	of (1)	in this fo a curren uired, Dispos	orm are not rettly valid OME ed of, or Bene vertible securi isable and tte	equired 3 contro ficially ( ties)	Owned  le and A  derlyin  ities	spond un nber. I Amount		9. Number o Derivative Securities Beneficially Owned Following Reported	Ownersh Form of Derivativ Security: Direct (L or Indirec	11. Nature ip of Indirect Beneficial Ownership (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II  3A. Deemed  Execution Date, if any	- Deriva (e.g., p 4. Transact Code	tive Secuuts, calls, 5. Nu ion Deriv Secur Acqu or Di (D)	mber of the state	ants, of (1) (A) d of	in this for a current uired, Dispost options, con 6. Date Exerc Expiration Date 1	orm are not rettly valid OME ed of, or Bene vertible securi isable and tte	ficially (ties)  7. Title of Unc. Securi	Owned  Lee and Aderlyin ities  3 and	spond un nber. I Amount	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following	Ownersh Form of Derivativ Security: Direct (L or Indirec	11. Nature ip of Indirect Beneficial Ownership (Instr. 4)

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Noble James C/O ADAPTIMMUNE THERAPEUTICS PLC, 60 JUBILEE AVENUE, MILTON PARK ABINGDON, X0 OX14 4RX	X					

#### **Signatures**

/s/ James Julian Noble	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.

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

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.