FORM 4

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

OMB APPR	OVAL
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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

(Print or Ty															
	Name and Address of Reporting Person* aks Tal Zvi (Last) (First) (Middle) /O ADAPTIMMUNE THERAPEUTICS PLC,, 60 JBILEE AVE, MILTON PARK (Street) BINGDON, X0 OX14 4RX		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						
C/O ADA				3. Date of Earliest Transaction (Month/Day/Year) 07/01/2022						Officer (give title below) Other (specify below)					
ARINGE			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_1	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		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3)		ity 2. Transa Date (Month/h		Execu r) any	Deemed ution Da	ite, if (4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		(D) Own Tran	Amount of Securities Beneficially byned Following Reported ransaction(s)		C F	Ownership of	eneficial
		(Month/Day/Year) Code V		de V Am	(A) or nount (D)	(Inst	or (T			r Indirect (D) Ownership (Instr. 4)) nstr. 4)					
Reminder: 1	Report on a s	eparate fine for each	elass of securities of						who respond						74 (9-02)
Reminder: 1	Report on a s	eparate fine for each		- Deriv	ative Se			in this fo a current uired, Dispose	rm are not re- ly valid OMB ed of, or Benefi	quired to r control nu icially Own	espond ur umber.				74 (9-02)
1. Title of	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date	Table II 3A. Deemed Execution Date, if	4. Transac Code	ative Seputs, cal	Number erivative curities equired (Dispose 1) astr. 3, 4	of (A) ed of	in this fo a current uired, Dispose	rm are not re- ily valid OMB ed of, or Benefi vertible securit isable and te	quired to r control nu icially Own	ed Amount	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indired Beneficia Ownersh (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	4. Transac Code	ative Seputs, cal	Number erivative curities equired (Dispose	of (A) ed of	in this fo a current uired, Dispose , options, conv 6. Date Exerci Expiration Da	rm are not re- ily valid OMB ed of, or Benefi vertible securit isable and te	control nucleicially Own ies) 7. Title and of Underly Securities	ed Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indire Beneficie Ownersh (Instr. 4)

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Zaks Tal Zvi C/O ADAPTIMMUNE THERAPEUTICS PLC, 60 JUBILEE AVE, MILTON PARK ABINGDON, X0 OX14 4RX	X				

Signatures

/s/ Tal Zvi Zaks	07/01/2022
**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 GBP0.23 based on an exchange rate of \$U.S. 1.216007 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.