FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average bu	rden								
hours per response:	0.5								

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or	Secti	on 30	(h) of the	Inves	stment (Con	npany Act	of 1940									
Name and Address of Reporting Person* Pellini Michael J								e and Tio				ymbol C <u>orp</u> [<i>A</i>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
<u>I CIIIII</u>	IVIICIIACI :	<u>, </u>										-			X	Directo	or		10% O	wner		
(Last) (First) (Middle) C/O ADAPTIVE BIOTECHNOLOGIES CORP.						3. Date of Earliest Transaction (Month/Day/Year) 03/01/2021										Officer below)	(give title		Other (below)	specify		
SUITE 200																						
							4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)															\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		iled hy One	Rend	orting Perso	n l		
SEATTL	E W	7A	98102										2:	Form filed by More than One Re			•					
(City)	(S	itate)	(Zip)																			
		Tab	ole I - Nor	n-Deriv	ative	e Se	curit	ties Ac	quir	red, D	isį	osed o	f, or Be	enef	icially	Owned						
1. Title of Security (Instr. 3) 2. Trans: Date (Month/I					Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.						5. Amou Securitie Benefici Owned F Reporte	es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Co	ode V	,	Amount	(A) ((D)	r P	rice	Transaci (Instr. 3	ion(s)			(msu. 4)		
Common Stock 03/01/.							2021			M		20,000	0 A		\$6.55	20),000		D			
Common Stock 03/01/2					/2021					S		20,000	0 D \$		57.8 ⁽¹)	0		D			
		7	Table II -									sed of, onvertil				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	Code (of		Expir	ate Exer iration D nth/Day/	ate			ties ng e Sec	urity	3. Price of Derivative Security Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	Owners Form: ly Direct (or Indir (I) (Inst	Ownership	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	e cisable		xpiration	Title	or Nu of	mber ares							
Stock Option (Right to Buy)	\$6.55	03/01/2021			М			20,000		(2)	0	2/07/2028	Common Stock	20	,000	\$0.00	55,00	0	D			

Explanation of Responses:

- 1. The price reported for this transaction is a weighted-average price. The shares were sold in multiple transactions ranging from \$57.75 to 58.19, inclusive. The reporting person undertakes to provide to Adaptive Biotechnologies Corporation, any security holder of Adaptive Biotechnologies Corporation, 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 any footnotes to this Form 4.
- 2. The options vested with respect to 1/4 of such shares on February 7, 2019, with 1/48 of such shares vesting thereafter at the end of each full month of continuous service until fully vested.

Remarks:

/s/ Michael Pellini by Eric L. Billings, attorney-in-fact

03/03/2021

** 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.