SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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

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

1. Name and Address of Reporting Person* WHITE ROBERT S.				er Name <b>and</b> Tick Cure, Inc. [ A	0	Symbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
WHITE ROE	<u>BERT S.</u>						X	Director	10% C	Owner		
(Last) 9060 ROCKY P	(First) OINT DRIVE	(Middle)		e of Earliest Transa 7/2022	action (Month/	Day/Year)		Officer (give title below)	Other below	(specify )		
			4. If A	mendment, Date of	f Original Filed	I (Month/Day/Year)		vidual or Joint/Grou	p Filing (Check	Applicable		
(Street) VERO BEACH	FL	32963					Line)	Form filed by On Form filed by Mo				
(City)	(State)	(Zip)						Person				
	Та	ble I - Nor	n-Derivative S	ecurities Acq	uired, Disp	oosed of, or Benef	icially	Owned				
1. Title of Security	(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transaction	4. Securities Acquired (A Disposed Of (D) (Instr. 3		5. Amount of Securities Beneficially	6. Ownership Form: Direct	7. Nature of Indirect Beneficial		

	(Month/Day/Year)	if any (Month/Day/Year)	Code ( 8)	de (Instr. 5)			Beneficially Owned Following Reported	(I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	n(s)	
Common Stock	05/25/2022		A		3,564 <sup>(1)</sup>	A	\$ <mark>0</mark>	40,799	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Expira		Expiration Da	6. Date Exercisable and Expiration Date (Month/Day/Year)		e and int of rities rlying ative ative (Instr. 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The Reporting Person acquired these shares pursuant to a Restricted Stock Award under the AtriCure, Inc. 2014 Stock Incentive Plan. The shares will vest upon the one-year anniversary of the grant date.

## Remarks:

<u>/s/ Allison Walker as</u> <u>Attorney-in-fact for B.</u> Kristine Johnson

05/27/2022

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\ast}$  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.