FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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	OMB APPROVAL										
ı											
l	OMB Number:	3235-0287									
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	Check this box if no longer subject
$\neg$	to Section 16. Form 4 or Form 5
$\Box$	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

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1. Name a	2. Issuer Name <b>and</b> Ticker or Trading Symbol AtriCure, Inc. [ ATRC ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)										
Wirick Angela L															Direc			10% Ov		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 08/06/2023								X	belov	,		Other (s	specify	
7555 INNOVATION WAY						00/00/2023									(	Chief Financial Officer				
/ 555 INNOVATION WAY						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
						4. II Americanent, Date of Original Filed (Month/Day/Teal)								Line)						
(Street)			<b>5</b> 0.40	0.005										X	Form	filed by On	ne Rep	porting Pers	on	
MASON	I OI	1 4	5040-	9695											Form filed by More than One Reporting					
															Person					
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication															
											saction was n ions of Rule 1					truction or wr	itten p	olan that is int	ended to	
satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																				
		Table	I - No	n-Deriva	tive S	ecur	ities	Acc	ιuired,	Dis	posed of	f, or l	Benef	iciall	y Owr	ned				
1. Title of	Security (Ins	tr. 3)		2. Transacti	Execution Date,			3. 4. Securities Acquired (A				A) or 5. Amount of		ount of			7. Nature			
	, ,	•		Date (Month/Day				Transaction Disposed Of (I Code (Instr. 5)		Of (D) (Instr. 3, 4 and		4 and	nd Securities Beneficially		Form: Direct (D) or	of Indirect Beneficial				
(WOILLINDA)					(Month/Day/Year)			8)				Owne		d İn		direct (I)	Ownership (Instr. 4)			
											(A) or			Repor	rted (		11301. 4)	(111501.4)		
								Code	l۷	Amount	(D)	O Pri	ce	Transaction(s) (Instr. 3 and 4)						
Common	023		F		5,191(1)	D \$57.		7.23	.23 86,601			D								
		Tab	le II ·	- Derivativ							•			•	Owne	ed				
				(e.g., pu	ts, cal	ls, v	varra	ınts,	optior	ıs, c	convertib	le se	curiti	es)						
1. Title of	2.	3. Transaction		eemed	4.		5.		6. Date Exercisab				e and		Price of 9. Numbe			10.	Beneficial	
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execu	,	Transaction Code (Instr.		Number of		Expirati (Month/			Amount of Securities			rivative curity	derivative Securities		Ownership Form:		
(Instr. 3)			th/Day/Year)	8)	`		Derivative Securities		Underlyin				(In:	str. 5)	Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)		
				Acquired (A) or Disposed								rity			Following		(I) (Instr. 4)	(11150. 4)		
								(Instr. 3 and			. 3 and 4	•)		Reported Transaction(s)						
						of (D) (Instr. 3, 4 and 5)									(Instr. 4)	(5,	'			
												Amour	,							
												or								
							(A)		Date		Expiration		Number of							
				Code	ode V		(D)	Exercisable		Date	Title	Shares	·							

## Explanation of Responses:

1. The Reporting Person has elected to transfer these shares to the Company to satisfy the tax withholding obligation incurred upon the vesting and release of shares previously acquired pursuant to a Restricted Stock Award or Performance Share Award.

## Remarks:

/s/ Angela L. Wirick

08/08/2023

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.