FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response	e: 0.5							

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

Name and Address of Reporting Person* Prange Karen					2. Issuer Name and Ticker or Trading Symbol AtriCure, Inc. [ATRC]										k all app	,	ng Pe	rson(s) to I	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/08/2023										Officer (give title pelow)		Other (s	specify	
7555 INNOVATION WAY					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line)	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)													X	X Form filed by One Reporting Person					
MASON	•			9695										Form filed by More than One Reporting Person					
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication														
	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																		
		Table	- No	n-Deriva	tive S	ecur	ities	Acq	uired,	Dis	posed of	f, or l	Bene	eficiall	y Owr	ned			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day					/Year)	Deemed ution Date, / th/Day/Year)				Disposed	urities Acquired (A sed Of (D) (Instr. 3			5. Amo Securi Benefi Owned Follow	ties cially I ing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or F	Price	Reported Transaction(s) (Instr. 3 and 4)				
Common Stock 06/08/2						2023					713	I) [\$47.89	16,140			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)	ive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		Code (Instr. 8)		5. Numl of Deriv Secu Acqu (A) or Dispo of (D) (Instr	rative rities ired r osed)	6. Date I Expiration (Month/I	on Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code		Code	v	(A)	(D)	Date Expiration Exercisable Date		Title	Amo or Num of Shar	ber						

Explanation of Responses:

Remarks:

/s/ Karen N. Prange

06/12/2023

** 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.