FORM 4

Check this box if no longer subject Section 16. Form 4 or Form 5

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| to | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Strong Stewart W | | | | | | 2. Issuer Name and Ticker or Trading Symbol AtriCure, Inc. [ATRC] | | | | | | | | | Check | tionship of Reportin all applicable) Director Officer (give title | | 10% | Owner (specify | |
|---|---|--|----------------------------|---------|---|---|---------|--|-------------------------------------|---|--|------|---------------|------------------------|--|--|---|---|--|--|
| (Last) (First) (Middle) 6033 SCHUMACHER PARK DRIVE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/29/2009 | | | | | | | | | | X | belov | v) ` | belo lent US Sale | w) | |
| (Street) WEST CHESTE | ır OF | H 4 | 5069 | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (St | ate) (2 | Zip) | | | | | | | | | | | | | . 0.0 | | | | |
| | | Tabl | e I - Nor | ı-Deriv | ative | Se | curitie | s Acc | uired, | Dis | posed o | f, o | r Bene | efici | ally | Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | ar) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (| Transaction Dispose Code (Instr. 5) | | ties Acquired (A) I Of (D) (Instr. 3, | | | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | • | Transaction(s) (Instr. 3 and 4) | | | (111511.4) | |
| Common Stock 07/29/ | | | | | 9/2009 | | | | A | | 16,00 | 0 | A | \$0(1) | | 18,634 ⁽²⁾ | | D | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | y Ov | vned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execution Date, T if any C | | | Transaction Code (Instr. | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration | | | or | str. 3 ount nber | | vative urity r. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

- 1. Mr. Strong acquired these shares pursuant to a Restricted Stock Award under the AtriCure, Inc. 2005 Equity Incentive Plan. The shares will vest 25% annually over four years.
- 2. This figure includes 1,134 and 1,500 shares acquired pursuant to the AtriCure, Inc. 2008 Employee Stock Purchase Plan for the six month periods ending December 31, 2008 and June 30, 2009, respectively.

/s/ Julie A. Piton as Attorneyin-Fact for Stewart W. Strong

07/31/2009

** 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.