FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:		3235-028									

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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).

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

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1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol AtriCure, Inc. [ATRC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
ROBARDS KAREN P						<u></u>									X	Direc	ctor		10% C	wner	
(Last) (First) (Middle) 173 RIVERSIDE DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 11/19/2008										Office	er (give title w)		Other (below)	specify	
(Street) NEW YORK NY 10024					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Indivine)						
(City)	(St	ate) (Zip)													. 0.0					
		Tabl	e I - Noi	n-Deriv	ative	Sec	curitie	s Ac	quired,	Dis	posed o	f, or	Bene	eficia	ally	Owne	ed				
1. Title of Security (Instr. 3) 2. Transa Date (Month/Date)					ar) E	2A. Deemed Execution Date, f any Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3,			nd	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		Transa	ransaction(s) Instr. 3 and 4)			(1115111. 4)	
Common	Stock		11/19/2008 P 2,000 A \$2.96 176,499 D						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)	3A. Deemee Execution I if any (Month/Day	Date,		Transaction Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			vative irity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	wnership orm: irect (D) · Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	ode V			Date Exercisal		Expiration Date	of	of Sha	nber res							

Explanation of Responses:

/s/ Karen P. Robards

11/20/2008

** 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.