FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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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(b) of the Investment Company Act of 1940

	ddress of Reporting	•	2. Issuer Name and Ticker or Trading Symbol <u>AtriCure, Inc.</u> [ATRC]	(Cheo	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
					Director	10% Owner				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)	X	Officer (give title below)	Other (specify below)				
7555 INNOVATION WAY			06/30/2023		President, CEO, & Director					
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)						
MASON	Street) MASON OH 450			X	Form filed by One Reporting Person					
			-		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 I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following	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	Reported Transaction(s) (Instr. 3 and 4)		
Common Stock	06/30/2023		A		557 ⁽¹⁾	A	\$38.11 ⁽²⁾	596,610	D	
Common Stock								3,310	I	Held by reporting person's children
Common Stock								1,000	I	Held by reporting person's parents

Tab	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
	(e.g., pu	ts, calls, v	varrants,	options, convertib	le securities	5)					

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)	xecution Date, any Code (Instr. of Ionth/Day/Year) 8) 5 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		of Deriv Secu Acqu (A) of Dispo of (D) (Instr	Number Expiration Date				e and int of rities rlying ative rity . 3 and 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. Shares acquired pursuant to the AtriCure, Inc. 2018 Employee Stock Purchase Plan for the period ended June 30, 2023.

2. In accordance with the ESPP, these shares were purchased based on 85% of the closing price of the issuer's common stock on January 3, 2023, which is the first trading day of the applicable offering period. The closing price on January 3, 2023 was \$44.84.

Remarks:

<u>/s/ Allison Walker as</u> <u>Attorney-in-fact for Michael</u> 07/03/2023

<u>H. Carrel</u>

** 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.