FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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ton, D.C. 20549	OMB ABBB
	│ OMB APPR

OMB APP	ROVAL									
OMB Number:	3235-0287									
Estimated average burden										

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

hours per response: 0.5

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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)					
<u>Krell Elizabeth D</u>					1-2	income, me. [ mixe ]										X Directo	r		10% O	wner	
(Last) 13005 H	(Fi	*	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/15/2011										Officer below)	(give title	Other (sp below)		specify	
		4. 11	If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable								
(Street)						monamon, bate of original rines (monambay/real)									Line	Line)					
HAGERSTOWN MD 21742																X Form filed by One Reporting Person  Form filed by More than One Reporting					
																Form to Person		e tnan	One Repo	rting	
(City)	(S	tate)	(Zip)																		
		Tab	le I - Nor	n-Deriv	ative	e Se	curit	ies A	cqu	ired, I	Dis	osed o	f, or	r Ben	eficial	y Owned	l				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						Execution Date,			Code (Instr.						Benefici	es Fo ally (D) Following (I)		vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount		(A) or (D)	Price	Transact (Instr. 3	tion(s)			(Instr. 4)				
Common Stock 06/15					5/2011				М		1,000	1,000 A		\$2.5	6,	6,162		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
	Ι.		uts, calls, warrants, options, convertible secur							illes)	I	I	. 1		1						
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if if any (Month/Day	Date,	iransaction Code (Instr.		of Deri Secu Acq (A) o Disp of (E	osed )) ir. 3, 4	Exp	Pate Exe piration I pnth/Day	Date		7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	is illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e ercisable		expiration pate	Title		Amount or Number of Shares						
Stock Option (right to	\$2.58	06/15/2011			M			1,000	05/2	21/2010 <sup>(</sup>	1) 0	5/21/2019		nmon ock	1,000	\$0.00	9,000	)	D		

## **Explanation of Responses:**

1. These options were granted on May 21, 2009 and are exercisable cumulatively at a rate of 33.33% per annum beginning on the earlier of (i) the anniversary of the date of grant and (ii) the date on which the Company's annual meeting of shareholders is held that year, provided the Reporting Person is a director immediately prior to such annual meeting.

> /s/ Elizabeth D. Krell 06/16/2011 \*\* 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.