Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL								
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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* <u>Yuen Maggie</u>					2. Issuer Name and Ticker or Trading Symbol AtriCure, Inc. [ATRC]										tionship of Reporting all applicable) Director		ng Pe	rson(s) to Is	
(Last) 7555 INI	(Last) (First) (Middle) 7555 INNOVATION WAY			3. Date of Earliest Transaction (Month/Day/Year) 06/15/2021										Office belov	ficer (give title low)		Other (specify below)		
(Street) MASON OH 45040 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year) tive Securities Acquired, Disposed of, or Benef								Line) X	Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3) 2. Trans Date			2. Transac	tion 2A. Deemed Execution Date,		d Date,	3. 4. Securities Acquired Disposed Of (D) (Instr. Code (Instr. 5)			ired (A)	A) or 5. Amou Securiti Benefic		ount of 6. 0 ties For cially (D) I Following (I)		wnership m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
			00/15/	2021			Code	v	Amount	(A) or (D) Pri			Transa (Instr.	ransaction(s) nstr. 3 and 4)		D	(Instr. 4)		
Common Stock 06/15/2021 A 2,245 A \$0.00 ⁽¹⁾ 2,245 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code (8)	(instr.	of Deriv	r osed) r. 3, 4	6. Date Expirat (Month)	ion Da Day/Y		7. Titl Amou Secun Under Deriv Secun 3 and	int of rities rlying ative rity (Inst	Der Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

1. The Reporting Person acquired these shares pursuant to a Restricted Stock Award under the AtriCure, Inc. 2014 Stock Incentive Plan. The shares will vest 33% annually over three years from date of grant.

Remarks:

/s/ Maggie Yuen

06/17/2021

** 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.