FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
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l	hours per response:	0.5							

	Check this box if no longer subject to
\neg	Section 16. Form 4 or Form 5
J	obligations may continue. See
	Instruction 1(h)

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*							2. Issuer Name and Ticker or Trading Symbol AtriCure, Inc. [ATRC]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
<u>Morley Deborah L</u>							And J								Di	rector	10% (Owner	
(Cara) (ASAUL)						2. Data of Farlings Transportion (Month (Day/Year)								\dashv		ficer (give title low)	Other below	(specify	
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 07/29/2009									VP Clini	cal Affairs		
6033 SCHUMACHER PARK DR						07/25/2005													
(Street)						If Amendment, Date of Original Filed (Month/Day/Year)								6.	6. Individual or Joint/Group Filing (Check Applicable				
WEST				1									Lin	Line)					
CHESTE	R OH		15069		1										X Fo	orm filed by On	m filed by One Reporting Person		
															Form filed by More than One Reporting Person				
(City)	(St	ate) (Zip)																
		Tabl	e I - Non	-Deriva	ative	Sec	curitie	s Acc	uired,	Dis	posed o	f, or	Bene	eficia	lly Ow	ned			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ction	2A. Deemed Execution Date,			3. 4. Securities Acquired (A) Transaction Disposed Of (D) (Instr. 3, 4								6. Ownership Form: Direct	7. Nature of Indirect	
					(Month/Day/Year				Code (Instr.					,	Ben	eficially ned Following	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
						Ι`			 				(A) or D			orted nsaction(s)	' '	(Instr. 4)	
									Code	V	Amount		(D)	Price		tr. 3 and 4)			
Common Stock 07/29/						/2009					16,00	0	A	\$ <mark>0</mark> (.)	27,879 ⁽²⁾	D		
		Та	ıble II - D												Owne	d	,		
			(6	e.g., pu	ıts, c	alls	, warr	ants,	option	s, c	onvertib	le se	ecurit	ies)					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		ransaction ode (Instr.		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		xercis n Date ay/Ye		Amount of			8. Price of Derivativ Security (Instr. 5)	ative derivative rity Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	and 5		Date Exercisal		Expiration Date	Title	Amo or Num of Shai	nber					

Explanation of Responses:

- 1. Ms. Morley 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 486 shares acquired pursuant to the AtriCure, Inc. 2008 Employee Stock Purchase Plan for the six month period ending June 30, 2009.

/s/ Julie A. Piton as Attorneyin-Fact for Deborah L. Morley

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.