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
\neg	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

1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Yount Deborah Lee					AtriCure, Inc. [ATRC]								"		Direc	tor		10% Ov			
(Last)	ast) (First) (Middle) 555 INNOVATION WAY					3. Date of Earliest Transaction (Month/Day/Year) 06/30/2023								X Officer (give title below) Other (specify below) Chief Human Resources Officer							
/555 INNOVATION WAY						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)													L	Line) X Form filed by One Reporting Person							
MASON ———	OI	OH 45040												Form filed by More than One Reporting Person							
(City)	(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 - Ne	on-Deriva	tive S	ecur	ities	Acc	quired	, Dis	sposed of	f, or E	Benefic	ially	/ Owr	ned					
1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/N					Execution Date,			<i>'</i>	3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3) 5)				, 4 and Secu Bene Owner Follor		icially d	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	Reported Fransaction(s) (Instr. 3 and 4)						
Common Stock 06/30/20)23				A		450 ⁽¹⁾	Α	\$38.1	8.11 ⁽²⁾		29,883		D			
		Tab	le II	- Derivativ (e.g., pu							osed of, convertib			•	Owne	ed					
Derivative Conversion D		3. Transaction Date (Month/Day/Year)	Exec if any	Deemed ution Date, y tth/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				ate	7. Title Amou Secur Under Deriva Secur (Instr.	nt of ities lying ative	Deri Sec	rice of ivative urity tr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct or India (I) (Inst	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	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:

/s/ Allison Walker as

Attorney-in-fact for Deborah 07/03/2023

L. Yount

** 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.