FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

## 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

1. Name and Address of Reporting Person*					2. Issuer Name <b>and</b> Ticker or Trading Symbol AtriCure, Inc. [ ATRC ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
ROBARDS KAREN P												X Directo	r		10% Ow	/ner	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 05/19/2010							Officer below)	(give title		Other (s below)	pecify	
173 RIVERSIDE DRIVE																	
				4	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable					
(Street)											Line	•		_			
NEW Y	ORK N	Y	10024								-		led by One	•	•		
												Form fi Person	led by More	than	One Repor	ting	
(City)	(S	tate)	(Zip)									1 013011					
		Tal	ole I - Non-	<b>Derivati</b>	ve Se	curitie	s Ac	quired, Di	sposed o	f, or Be	neficiall	y Owned					
Date				2. Transacti Date (Month/Day/	Execution Date			Code (Instr. 5)				and Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code V	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)			Instr. 4)	
			Table II - D					uired, Dis				Owned					
1. Title of Derivative			3A. Deemed Execution Da	4.	action	5. Number		6. Date Exercisable and 7. Ti		7. Title an	d Amount	8. Price of Derivative	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Year)	if any (Month/Day/Y	Code	(Instr.	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(Month/Day/Year)		Underlying Derivative Security (Instr. 3 and 4)		Security (Instr. 5)					
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Stock Option right to buy	\$5.15	05/19/2010		A		10,000	(-)	05/19/2011 <sup>(1)</sup>	05/19/2020	Common	10,000	(2)	10,000		D		

## **Explanation of Responses:**

- 1. Exercisable cumulatively at a rate of 33.33% per annum commencing on the earlier of (i) the anniversary of the date of grant and (ii) the date on which the Company's annual meeting of stockholders is held that year, provided the Reporting Person is a director immediately prior to such annual meeting.
- 2. Not applicable

/s/ Julie A. Piton For: Karen P. Robards

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.