FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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CTATEMENT OF CHANCES IN DENETIONAL OWNEDSHIP	
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHII	NEFICIAL OWNERSHIP

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).

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* CARREL MICHAEL H						2. Issuer Name and Ticker or Trading Symbol AtriCure, Inc. [ATRC]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
CARR	EL MICH	AEL H			1		,			1				X	Direc	ctor	10% (Owner	
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)								X	Offic below	er (give title w)	Other below	(specify)	
7555 INNOVATION WAY						12/31/2019									Pr	resident, CEO, & Director			
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line)	6. Individual or Joint/Group Filing (Check Applicable Line)				
MASON	OI	\mathbf{H} 4	15040											X	Forn	n filed by One	Reporting Pers	son	
(City)	(St	ate) (Zip)												Forn Pers		e than One Rep	oorting	
		Tabl	e I - No	on-Deriv	ative	Sec	uritie	s Ac	quired	l, Dis	sposed o	f, or E	Benef	icially	Owne	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4)								6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) o (D)	r Pri	се	Trans	action(s) 3 and 4)		(11150.4)	
Common Stock 12/				12/31/2	2019				A		387(1)	A	\$2	5.99(2)	6	26,490	D		
		Та	ble II -								osed of, convertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	on Date,	4. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) o Dispo of (D (Instr and 5	rities lired r osed)	6. Date Expirati (Month/	ion Da		7. Title Amoun Securit Under! Derivat Securit and 4)	nt of ties ying tive	Der Sec (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. Shares acquired pursuant to the AtriCure, Inc. 2018 Employee Stock Purchase Plan for the period ended December 31, 2019.
- 2. In accordance with the ESPP, these shares were purchased based on 85% of the closing price of the issuer's common stock on July 1, 2019, which was the first trading day of the applicable offering period. The closing price on July 1, 2019 was \$30.58.

Remarks:

<u>/s/ Michael H. Carrel</u> <u>01/03/2020</u>

** Signature of Reporting Person Date

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

- * 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.