FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-02

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(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

Name and Address of Reporting Person*     Noznesky Justin J					2. Issuer Name <b>and</b> Ticker or Trading Symbol AtriCure, Inc. [ ATRC ]									Check all a	pplicable) ector	ng Person	Person(s) to Issuer  10% Owner Other (specify		
(Last) (First) (Middle) 7555 INNOVATION WAY					3. Date of Earliest Transaction (Month/Day/Year) 08/15/2019										A be			below)	
(Street)  MASON  (City)			15040 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date				Date	Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)				ties Acquired (A) d Of (D) (Instr. 3, 4			nd Sed Ber Ow	mount of urities eficially ned Following orted	6. Owner Form: I (D) or In (I) (Inst	Direct Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price	Trai	saction(s) tr. 3 and 4)			(1130.4)
Common Stock					08/15/2019				G V		2,500	2,500 D		\$0.0	91,568		Ι	)	
	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)	rative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		Date, Transaction Code (Inst			on of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)		Owi Fori Dire or Ii (I) (I	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nui of	mber ares						

## Explanation of Responses:

1. No consideration was received in connection with this gift to charity.

## Remarks:

/s/ Justin J. Noznesky

08/16/2019

\*\* 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.