FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL									
	OMB Number:	3235-028								
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37 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

Name and Address of Reporting Person* Collar Mark A					2. Issuer Name and Ticker or Trading Symbol AtriCure, Inc. [ATRC]										all app	ship of Reporting Pe applicable) irector fficer (give title elow)		10% Owner		
(Last) (First) (Middle) 382 BISHOPSBRIDGE DR.					3. Date of Earliest Transaction (Month/Day/Year) 05/24/2017													belov	Other (specify below)	
(Street) CINCINNATI OH 45255 (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									i. Indiv ine) X	lividual or Joint/Group Filing (Check Applicable 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																			
Di				2. Transaction Date (Month/Day/Year)		ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and Secur Benef		cially I Following	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	е	Transaction(s) (Instr. 3 and 4)				(111341.4)		
Common Stock ⁽¹⁾					4/2017				A		5,805	5	A	\$0.00		13,767			D	
Common Stock																5,300			I	Held by spouse ⁽²⁾
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)	vative Conversion Date Execution Date rity or Exercise (Month/Day/Year) if any			Date,	Code (Instr.		n of l		Expiratio	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			rice of vative urity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ov Fo Dii or (I)	vnership vrm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code V		v	(A)	(D)	Date Exercisal	Date E Exercisable D		Amoun or Number of Title Shares		nber						

Explanation of Responses:

- 1. The Reporting Person acquired these shares pursuant to a Restricted Stock Award under the AtriCure, Inc. 2014 Stock Incentive Plan.
- 2. The Reporting Person disclaims beneficial ownership of these securities, except as to his pecuniary interest therein.

Remarks:

/s/ M. Andrew Wade as 05/25/2017 Attorney-In-Fact for Mark A. Collar

** 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.