Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response	. 05								

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* Wirick Angela L					2. Issuer Name and Ticker or Trading Symbol AtriCure, Inc. [ATRC]								(Che	eck all app Direct	ationship of Reporting I call applicable) Director Officer (give title below) Chief Financi		rson(s) to Is 10% O Other (wner		
(Last) (First) (Middle) 7555 INNOVATION WAY					3. Date of Earliest Transaction (Month/Day/Year) 11/04/2021									below			below)			
(Street) MASON (City)			5040 Zip)		4. If <i>F</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line) K Form Form	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - Noı	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficia	ly Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A. Securities Acquired			, 4 and Secur Benef		ies cially Following	Forn (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount (A) or (D)		Price	Transa	ansaction(s) nstr. 3 and 4)			(11150.4)			
Common Stock 11/04/2				2021		S		2,604 ⁽¹⁾)	\$85	70	0,146		D					
	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)	erivative Conversion or Exercise (Month/Day/Year) Frice of Derivative Security Date (Month/Day/Year) Frice of Derivative Security Execution Date, if any (Month/Day/Year)		4. Transa Code (8)			6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of Title Share		str.	s. Price of Derivative Security Instr. 5)			10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					

Explanation of Responses:

1. These shares were sold pursuant to a 10b5-1 trading plan.

Remarks:

/s/ Angela L. Wirick

11/08/2021

** Signature of Reporting Person

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.