AtriCure, Inc	с.									
Form 4										
November 0										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB AF OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 o Form 5	NGES IN SECUI	NGES IN BENEFICIAL OWNERSHIP OF SECURITIES				January 31,Expires:2005Estimated averageburden hours perresponse0.5				
obligatio may cont <i>See</i> Instru 1(b).	ns Section 17(a inue. uction		Utility Ho	lding Con	ipany	Act of	1935 or Section	1		
(Print or Type I	Responses)									
1. Name and Address of Reporting Person _2. IssueCARREL MICHAEL HSymbol				Iconor			Reporting Person(s) to			
	Cure, Inc. [ATRC]				(Check all applicable)					
(Month/I			ate of Earliest Transaction nth/Day/Year) 01/2016			_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) President, CEO, & Director				
(Street) 4. If Ame			nendment, D	endment, Date Original			6. Individual or Joint/Group Filing(Check			
Filed(Mor MASON, OH 45040				_X			Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State) (Zip) Ta	ble I - Non-	Derivative	Securi	ities Acqu	uired, Disposed of	, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transacti Code (Instr. 8)	4. Securit for(A) or Di (Instr. 3, 4) Amount	ies Ac sposed	quired l of (D) 5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
Common Stock	11/01/2016		F	30,176 (1)	D	\$ 17.95	509,528	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Addre	SS	Relationships							
L O	Director	10% Owner	Officer	Other					
CARREL MICHAEL H 7555 INNOVATION WAY MASON, OH 45040	Х		President, CEO, & Director						
Signatures									
/s/ Michael H. Carrel 1	1/04/2016								

<u>**</u>Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) The Reporting Person has elected to transfer these shares to the Company to satisfy the tax withholding obligation incurred upon the vesting and release of shares previously acquired pursuant to a Restricted Stock Award.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.