AtriCure, In Form 4 March 03, 2								
FORM	14 UNITED STAT	ES SECUDITIES AND EVCI	JANCE (OMMISSION	OMB AF OMB	PROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						3235-0287		
Check th if no lon	ger				Expires:	January 31,		
subject t	o SIAIEMENI	NERSHIP OF	Estimated average 2005					
Section Form 4 of		SECURITIES		burden hours per response 0.5				
Form 5	Filed pursuant	o Section 16(a) of the Securitie	s Exchang	e Act of 1934,	16300136	0.5		
obligation may con	tinue. Section 17(a) of u	e Public Utility Holding Comp	•		1			
<i>See</i> Instr 1(b).	ruction 300	h) of the Investment Company	Act of 194	0				
1(0).								
(Print or Type	Responses)							
	Address of Reporting Person]	2. Issuer Name and Ticker or Tr Symbol	5. Relationship of Reporting Person(s) to Issuer					
		AtriCure, Inc. [ATRC]		(Check all applicable)				
(Last)	(First) (Middle)	3. Date of Earliest Transaction						
7555 INNC	VATION WAY	(Month/Day/Year) 03/01/2017	_X_ Director10% Owner _X_ Officer (give title Other (specify					
				below) below) President, CEO, & Director				
	(Street)	4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check					
		Filed(Month/Day/Year)		Applicable Line) _X_ Form filed by One Reporting Person				
MASON, C	OH 45040				Iore than One Rej			
(City)	(State) (Zip)	Table I - Non-Derivative Se	curities Acq	uired, Disposed of	, or Beneficiall	y Owned		
1.Title of Security	2. Transaction Date 2A. D (Month/Day/Year) Execu	tion Date, if Transaction(A) or Disp	osed of (D)	5. Amount of Securities	6. Ownership Form: Direct			
(Instr. 3)	any (Mon	Code (Instr. 3, 4 a h/Day/Year) (Instr. 8)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership			
	×			Following Reported	(Instr. 4)	(Instr. 4)		
			(A) or	Transaction(s)				
		Code V Amount	(D) Price	(Instr. 3 and 4)				
Common Stock	03/01/2017	A 160,000	$A \underbrace{\stackrel{\$ 0}{\underline{(1)}}}$	670,084	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
CARREL MICHAEL H 7555 INNOVATION WAY MASON, OH 45040	Х		President, CEO, & Direc	tor				
Signatures								
/s/ M. Andrew Wade as Attorney-In-Fact for Michael H. 03/03/2017 Carrel								
<u>**</u> Signature of Rep	Date							

**Signature of Reporting Person

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).
- The Reporting Person acquired these shares pursuant to a Restricted Stock Award under the AtriCure, Inc. 2014 Stock Incentive Plan. (1) The shares will vest 25% annually over four years from date of grant.

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.