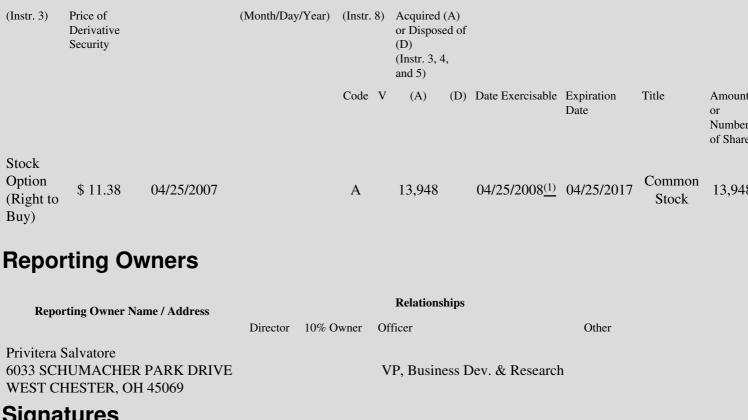
AtriCure, In Form 4									
April 27, 2007 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									PROVAL 3235-0287 January 31,
subject of Section Form 4 Form 5 obligation may cor	if no longer subject to Section 16.STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESExpires:Currotical y 01, 2005Form 4 or Form 5 obligations may continue. See InstructionFiled pursuant to Section 16(a) of the Securities Exchange Act of 1934, 30(h) of the Investment Company Act of 1940Expires:Currotical y 01, 2005Expires:Securities IN BENEFICIAL OWNERSHIP OF burden hours per responseExpires:Currotical y 01, 2005								2005 average irs per
(Print or Type	Responses)								
1. Name and Address of Reporting Person <u>*</u> Privitera Salvatore			2. Issuer Name <b>and</b> Ticker or Trading Symbol AtriCure, Inc. [ATRC]			ng	5. Relationship of Reporting Person(s) to Issuer		
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 04/25/2007				(Check all applicable) <u></u> Director <u></u> 10% Owner <u></u> Officer (give title <u></u> Other (specify below) VP, Business Dev. & Research		
			If Amendment, Date Original ed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
WEST CH	ESTER, OH 4506	9					Form filed by Person	More than One R	eporting
(City)	(State)	(Zip) Ta	ble I - Non-I	Derivative	Secu	rities A	cquired, Disposed	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8) Code V	Disposed ( (Instr. 3, 4	(A) or of (D) and (A) or	)	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 Beneficial Ownership (Instr. 4)
Reminder: Re	port on a separate line	e for each class of se	curities benef	ficially own	ned di	rectly o	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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount o
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

## Edgar Filing: AtriCure, Inc. - Form 4



## Signatures

/s/ Salvatore	04/27/2007			
Privitera	04/2//2007			

\*\*Signature of Reporting Person

## **Explanation of Responses:**

If the form is filed by more than one reporting person, see Instruction 4(b)(v). \*

Date

- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- The option vests and is exercisable as to 25% of the shares on April 25, 2008 (one year from the date of grant) and the remaining 75% (1)thereafter vests and is exercisable in equal monthly installments on the same day of the month over the following three years.
- (2) Not applicable.

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.