### Edgar Filing: CARREL MICHAEL H - Form 4

CARREL M	/ICHAEL H											
Form 4												
March 06, 2												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB												
<b>CURIVI 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549										3235-0287		
Check t			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Shington	I, D.C. 200				Number: Expires:	January 31,		
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF										2005		
-	subject to Statement of chartoes in Beneficial ownershift of Section 16. SECURITIES								Estimated average burden hours per			
	Form 4 or								response			
	Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, <sup>obligations</sup> Section 17(a) of the Public Utility Helding Company, Act of 1025 or Section											
See Instruction See Instructio												
<i>See</i> Inst 1(b).	ruction	50(II)	) of the fi	ivestillen	t Company	y Act	01 1940	)				
1(0).												
(Print or Type	Responses)											
1. Name and Address of Reporting Person <sup>*</sup> 2. Issuer Name <b>and</b> Ticker or Trading 5. Relationship of Reporting Person(s) to												
	MICHAEL H		2. Issue Symbol	er Name <b>an</b>	d Ticker or T	Frading	>	5. Relationship of Reporting Person(s) to Issuer				
	•	re Inc [/	ATRC1									
(Last)	(First)	(Middle)	AtriCure, Inc. [ATRC] (1 3. Date of Earliest Transaction						k all applicable)			
(Last) (First) (Midule)				(Month/Day/Year)				_X_ Director 10% Owner				
				03/01/2019				XOfficer (give titleOther (specify below) below)				
								President, CEO, & Director				
	4. If Am	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check						
				Filed(Month/Day/Year)				Applicable Line)				
_X_Form filed by O							ne Reporting Person ore than One Reporting					
MASON, OH 45040							1 0					
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative S	ecurit	ties Acqu	ired, Disposed of,	, or Beneficial	ly Owned		
1.Title of	2. Transaction I	Date 2A. Deer	med	3.	4. Securitie	es Acq	uired (A)	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Ye		n Date, if Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					Securities	Ownership	Indirect		
(Instr. 3)		any (Month/I						Beneficially Owned	Form: Direct (D)	Beneficial Ownership		
		X · · · ·						Following	or Indirect	(Instr. 4)		
						(A)		Reported Transaction(s)	(I) (Instr. 4)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)	(instr. i)			
Common									-			
Stock	03/01/2019			А	38,999	А	0 (1)	750,021	D			
Common					114,353		\$					
Stock	03/01/2019			F	(2)	D	ф 30.77	635,668	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.

#### Edgar Filing: CARREL MICHAEL H - Form 4

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
CARREL MICHAEL H 7555 INNOVATION WAY MASON, OH 45040	Х		President, CEO, & Director					
Signatures								

/s/ Allison Walker as Attorney-in-Fact for Michael H. Carrel

\*\*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)One third of the shares will vest annually upon the respective one, two, and three year anniversaries of the date of grant.

03/05/2019

Date

The Reporting Person has elected to transfer these shares to the Company to satisfy the tax withholding obligation incurred upon the (2) 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.