SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPR	OVAL
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	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	S
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer Burgess Vincent J (Last) (First) (Middle) (Last) (First) (Middle) C/O ACUTUS MEDICAL, INC. 3. Date of Earliest Transaction (Month/Day/Year) 5. Relationship of Reporting Person(s) to Issuer (Street) CARLSBAD CA 92008 (City) (State) (Zip) (Zip)			Table I - Non-De	rivative Securities Acquired, Disposed of, or Ben	eficially	v Owned			
Burgess Vincent J Acutus Medical, Inc. [AFIB] (Check all applicable) Last) (First) (Middle) C/O ACUTUS MEDICAL, INC. 3. Date of Earliest Transaction (Month/Day/Year) Officer (give title Other (specify below) 04/01/2022 04/01/2022 Chief Executive Officer (Street) CARLSBAD CA 92008	(City)	(State)	(Zip)			Person			
Burgess Vincent J Acutus Medical, Inc. [AFIB] (Check all applicable) X Director 10% Owner (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Officer (give title Other (specify below) Other (specify below) C/O ACUTUS MEDICAL, INC. 2210 FARADAY AVE., SUITE 100 Other (specify below) Chief Executive Officer	· /	CA	92008		Line)	Form filed by One Re Form filed by More th	porting Person		
Burgess Vincent J Acutus Medical, Inc. [AFIB] (Check all applicable) X Director 10% Owner (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Officer (give title below) Other (specify below)	2210 FARADAY AVE., SUITE 100			4 If Amendment Date of Original Filed (Month/Dav/Year)	6 Indi	6. Individual or Joint/Group Filing (Check Applicable			
Burgess Vincent J Acutus Medical, Inc. [AFIB] (Check all applicable) X Director 10% Owner X Officer (give title Other (specify			,			, , ,			
Burgess Vincent I Acutus Medical, Inc. [AFIB]	(Loot) (Eirot) (Middlo)		(Middle)	Data of Earliest Transaction (Month/Day/Moar)	- x				
				Ŭ,	(Checl	(Check all applicable)			

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	if any	3. Transa Code (8)					5. Amount of Securities Beneficially Owned Following Reported	(D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1104.14)
Common Stock	04/01/2022		F		3,896 ⁽¹⁾	D	\$1.3	61,469	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Number of		f Expiration Date erivative (Month/Day/Year) ecurities cquired A) or isposed f (D) nstr. 3, 4		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v			Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents shares that have been withheld by the issuer to satisfy income tax withholding and remittance obligations in connection with the vesting of (and related delivery of shares underlying) restricted stock units reported on a Form 4 filed on April 2, 2021.

/s/ Tom Sohn as attorney-infact for Vincent J. Burgess

04/05/2022

** Signature of Reporting Person Date

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.