SEC For	rm 4 FORM	<u>л</u> I	JNITED	STAT	res	SF	CUF	ודוא	ES ANI) F	ХСНА		СОМІ	MISSION	1			
					TES SECURITIES AND EXCHANGE COM Washington, D.C. 20549										OMB APPROVAL			VAL
Section 16. Form 4 or Form 5 obligations may continue. See					l pursu	IT OF CHANGES IN BENEFICIAL OWNER pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940									Shire Estimated average burden			3235-0287 en 0.5
· · · · · · ·							.,					. Relationship	of Boporti	ng Do	rean(c) to lo	cuor		
1. Name and Address of Reporting Person [*] <u>Roberts David B</u>						2. Issuer Name and Ticker or Trading Symbol <u>LEMAITRE VASCULAR INC</u> [LMAT]									licable) tor	ng Pei	10% O	
(Last) (First) (Middle) C/O LEMAITRE VASCULAR, INC. 63 SECOND AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 03/19/2020									X Officer (give title Other (specify below) below) President and Director				
(Street) BURLINGTON MA 01803 (City) (State) (Zip)					4. If	Line) X Form f									Joint/Group Filing (Check Applicable filed by One Reporting Person filed by More than One Reporting n			
	(3)					<u> </u>		<u> </u>										
			le I - Non-E			_				Dis	-			-		10.0		7
1. Title of Security (Instr. 3) Date (Month/Date)					r) E	2A. Deemed Execution Date if any (Month/Day/Yea		Code (I					and Securit Benefic	ies ially Following	Forn (D) c	m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D) PI		Transad	nsaction(s) str. 3 and 4)			(1130.4)
		Т	able II - De (e.						quired, D s, option									
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transactio Code (Inst 8)		5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5	rities lired r osed) 7. 3, 4	6. Date Exercisable an Expiration Date (Month/Day/Year)		•	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)			Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				c	Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amour or Numbe of Shares	er				
Dividend Equivalent Rights	(1)	03/19/2020			A		7		(1)		(1)	Common Stock	7	\$0	58		D	
Dividend Equivalent Rights	(2)	03/19/2020			A		5		(2)		(2)	Common Stock	5	\$0	21		D	
Dividend Equivalent Rights	(3)	03/19/2020			A		9		(3)		(3)	Common Stock	9	\$0	32		D	
Dividend Equivalent Rights	(4)	03/19/2020			A		7		(4)		(4)	Common Stock	7	\$0	7		D	

Explanation of Responses:

1. These dividend equivalent rights accrued on a restricted stock unit award granted on 7/25/2016 and vest proportionately with such award. Each dividend equivalent right is the economic equivalent of one share of the Issuer's common stock.

2. These dividend equivalent rights accrued on a restricted stock unit award granted on 12/22/2017 and vest proportionately with such award. Each dividend equivalent right is the economic equivalent of one share of the Issuer's common stock.

3. These dividend equivalent rights accrued on a restricted stock unit award granted on 12/19/2018 and vest proportionately with such award. Each dividend equivalent right is the economic equivalent of one share of the Issuer's common stock.

4. These dividend equivalent rights accrued on a restricted stock unit award granted on 12/20/2019 and vest proportionately with such award. Each dividend equivalent right is the economic equivalent of one share of the Issuer's common stock.

/s/ Laurie A. Churchill, Attorney-in-fact

** Signature of Reporting Person Date

03/23/2020

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.