# FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

### 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

Name and Address of Reporting Person*     Gebauer Peter R						2. Issuer Name and Ticker or Trading Symbol LEMAITRE VASCULAR INC [ LMAT ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) (First) (Middle) C/O LEMAITRE VASCULAR, INC.					3. Date of Earliest Transaction (Month/Day/Year) 08/28/2015								X	Office	er (give title w)		(specify		
63 SECOND AVENUE					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) BURLINGTON MA 01803				-										Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(	State)	(Zip)																
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year				2 Ear) if	2A. Deemed Execution Date,			3. Transac Code (II	tion	4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			5. Amou Securiti Benefici Owned		nount of rities ficially	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) or (D)	Price				(Instr. 4)	(Instr. 4)			
Common Stock 08/28			08/28/201	5	;			М		7,242(1)	Α	\$7.	1		7,662	D			
Common Stock			08/28/2015				S		7,242	D	\$13.45	36(2)	7	0,420	D				
Common Stock 08/3			08/31/201	5	;			M		3,223(1)	A	\$7.	7.1		3,643	D			
Common Stock         08/31/2015				5			S		3,223	D	\$13.58	13.5801(3)		0,420	D				
		٦	abl	e II - Deriva (e.g., p							sposed of, , converti				vned				
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security		Date (Month/Day/Year)		. Deemed ecution Date, any onth/Day/Year)		nsaction le (Instr.		erivativo curities cquired ) or sposed (D) estr. 3, and 5)	6. Date Exel Expiration I (Month/Day			7. Title a Amount Securiti Underly Derivati Security and 4)	of es ing	of Deri Secu (Inst	Price rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code		v (A	) (D)	Date Exerci	sable	Expiration Date	Title	Amoun or Numbe of Shares	er					
Stock Option (Right to Buy)	\$7.1	08/28/2015			М			7,24	2 07/26/2	2011 <sup>(4)</sup>	07/26/2018	Commor Stock	7,242	2 \$0	0.00	22,304	D		
Stock Option (Right to Buy)	\$7.1	08/31/2015			М			3,22	3 07/26/2	2011 <sup>(4)</sup>	07/26/2018	Commor Stock	3,223	\$   \$0	0.00	19,081	D		

### **Explanation of Responses:**

- 1. Represents shares acquired upon exercise of options by the Reporting Person, as reported in Table II.
- 2. The price reported in Column 4 is a weighted average price. The transaction was executed in multiple trades ranging from \$13.45 to \$13.47. The reporting person undertakes to provide to the issuer, any securityholder of the issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares and price at which the transaction was effected.
- 3. The price reported in Column 4 is a weighted average price. The transaction was executed in multiple trades ranging from \$13.50 to \$13.67. The reporting person undertakes to provide to the issuer, any securityholder of the issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares and price at which the transaction was effected.
- 4. This option is exercisable and vests over a five-year period at a rate of 20% on the first anniversary of the date listed in the table, and the balance vesting in equal annual installments over the remaining four years.

### Remarks:

/s/ Laurie Churchill, Attorneyin-fact 09/01/2015

<sup>\*\*</sup> Signature of Reporting Person Date

- $^{\star}$  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.