FORM 4

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

OMB APPROVAL

OMB Number: 3235-0									
Estimated average burden									
hours per response:	0.5								

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

1. Name and Address of Reporting Person [*]		2. Issuer Name and Ticker or Trading Symbol <u>LEMAITRE VASCULAR INC</u> [LMAT]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Pellegrino Jos	<u>epn P JR</u>							<u> </u>	1	X	Director	10% C	Dwner
(Last) C/O LEMAITRE	(First) VASCULAR, IN	(Middle) C.		3. Date 12/08/	of Earliest Transac 2023	tion (Mo	onth/D	ay/Year)		X	Officer (give title below) Chief Fina	Other below ncial Officer	(specify)
63 SECOND AV	ENUE			4. If Am	endment, Date of C	Driginal	Filed (Month/Day/Ye	ar)	6. Indiv Line)	vidual or Joint/Group	Filing (Check A	pplicable
(Street)										X	Form filed by One	e Reporting Pers	on
BURLINGTON	MA	01803									Form filed by Mor Person	e than One Rep	orting
(City)	(State)	(Zip)		Rule 10b5-1(c) Transaction Indication									
				Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
Date			h/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
					Code	v	Amount	(A) or (D)	Price	 Reported Transaction(s) (Instr. 3 and 4) 		(Instr. 4)	
Common Stock			12/08/	2023		Α		2,287(1)	A	\$ <mark>0</mark>	9,953	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 6. Date Exercisable and 1. Title of 3. Transaction 3A. Deemed 5. Number 7. Title and Amount 8. Price of 9. Number of 10. 11. Nature of Securities Underlying Derivative Security (Instr. 3 and 4) Date (Month/Day/Year) Execution Date, of Indirect Beneficial Derivative Conversion Transaction Expiration Date (Month/Day/Year) Derivative derivative Ownership or Exercise Price of Derivative Code (Instr. 8) Derivative Form: Direct (D) or Indirect (I) (Instr. 4) Security (Instr. 3) if any (Month/Day/Year) Security (Instr. 5) Securities Securities Beneficially Ownership Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Owned (Instr. 4) Following Reported Security Transaction(s) (Instr. 4) Amount Number Date Expiration of v Code (A) (D) Exercisable Date Title Shares Stock Option (Right to \$54.65 12/08/2023 11,996 12/08/2023(2) 12/08/2030 11,996 \$<mark>0</mark> 11,996 D Α Stock Buy)

Explanation of Responses:

1. Represents a restricted stock unit award that vests on a time-based schedule as follows: 25% of the award vests on the anniversary of the grant date listed in the table, with the balance vesting in equal annual installments over the remaining three years. This award includes a provision for the withholding of shares by the Issuer to pay the withholding taxes due on each vesting date.

2. This option is exercisable and vests over a four-year period at a rate of 25% on the first anniversary of the date listed in the table, with the balance vesting in equal annual installments over the remaining three vears



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.