FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0									
Estimated average burden									
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b)

Name and Address of Reporting Person*     Roush John A						2. Issuer Name and Ticker or Trading Symbol LEMAITRE VASCULAR INC [ LMAT ]									k all applic Directo	able) r	Person(s) to Issu 10% Ow		ner	
(Last) (First) (Middle) C/O LEMAITRE VASCULAR, 63 SECOND AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 05/24/2021									Officer below)	(give title		Other (s below)	pecify	
(Street) BURLINGTON MA 01803 (City) (State) (Zip)					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)		·		Non-Deri	ivativ	e Sec	urit	ies A	cquire	ed, D	isposed o	f, or B	enefi	cially	Owned					
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day				tion	on 2A. Deemed Execution Date,		ed Date,	3. Transaction Code (Instr. 8)		4. Securities	Acquired (A) or (D) (Instr. 3, 4 and			5. Amou Securiti Benefici Owned	int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) or (D)	Price			orted nsaction(s) tr. 3 and 4)			(Instr. 4)			
Common Stock				05/24/2	05/24/2021				M		7,143(1)	A	\$1	4.13	14	1,643		D		
Common Stock 05/24/202					2021	21			S		7,143	D	\$50.	2453 <sup>(2</sup>	7,	7,500		D		
Common Stock 05/25/20					2021	21			M		357(1)	A	\$1	4.13	7,	7,857		D		
Common Stock 05/25/20				2021	21		S		357	D	\$	50	7,	7,500		D				
		-	Table I								posed of,				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ar) if any	emed ion Date, /Day/Year)	4. Transa Code ( 8)				6. Date Exerc Expiration Da (Month/Day/V		ate	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			3. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or	ount nber ıres						
Stock Option (Right to Buy)	\$14.13	05/24/2021			M			7,143	07/25/2	2016 <sup>(3)</sup>	07/25/2021	Commo Stock	n 7,	143	\$0	357		D		
Stock Option (Right to	\$14.13	05/25/2021			M			357	07/25/2	2016 <sup>(3)</sup>	07/25/2021	Commo Stock	n 3	57	\$0	0		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 \$50.00 to \$50.68. 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. This option is fully vested and exercisable.

/s/ Laurie A. Churchill, 05/26/2021 Attorney-in-fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.