FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number: 3235-0									
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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).

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) C/O LEN	,	rst) (Middle)		3. Date of Earliest Transaction (Month/Day/Year) $08/26/2015$								X	Officer below)	(give title	ernat	Other (s below) ional OP	
63 SECO	OND AVEN	4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) BURLINGTON MA 01803													X	<i>'</i>				
(City) (State) (Zip)																		
		Tab	e I - Non-Deri	vative	Sec	uriti	es A	cquir	red, D	isposed o	f, or E	Benef	icially	Owned				
1. Title of	Security (Ins	2. Transaction Date (Month/Day/Yo	Executio ear) if any				3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			and 5) Securiti Benefic Owned		es ially	Form (D) o Indir	n: Direct c r ect (I)	7. Nature of Indirect Beneficial Ownership	
						c	Code	v	Amount	(A) or (D)	Price		Following Reporte Transac (Instr. 3	ion(s)		r. 4) ((Instr. 4)	
Common Stock 08/26/2015								M		15,978(1)	A	\$0	.102	86,	86,398		D	
Common Stock 08/26/2015								S		15,978	D	\$13.	5336(2)	70,420			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)	SA. Deemed Execution Date, f any Month/Day/Year)	4. Transaction Code (Instr 8)				Expir	ate Exer ration C th/Day/		Amo Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		B. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
				Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	or Nu of	umber					
Stock Option (Right to Buy)	\$0.102	08/26/2015		М			15,978	06/02	2/1997 ⁽³⁾	06/02/2007 ⁽⁴	Comm Stoo		5,978	\$0.00	81,97	1	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 \$13.41 to \$13.69. 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.
- 4. This stock option was originally reported on Form 3 as having an expiration date of June 2, 2007, but does not in fact have an expiration date. Because an expiration date is required to be reported, the originally reported expiration date is included for the sake of consistency.

Remarks:

/s/ Laurie Churchill, Attorneyin-fact 08/28/2015

** 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.