FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
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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)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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Name and Address of Reporting Person* LeMaitre George W						2. Issuer Name and Ticker or Trading Symbol LEMAITRE VASCULAR INC [LMAT] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner													
(Last)	,	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/20/2023 X Officer (give title Other (specify below) Chairman and CEO										pecify			
63 SECOND AVENUE							4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line)												
(Street) BURLINGTON MA 01803						X Form filed by One Reporting Person Form filed by More than One Reporting Person													
(City)	(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 satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											l to								
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,		e, Transaction Disposed Code (Instr. 5)		ties Acquired (A) or I Of (D) (Instr. 3, 4 and		Securiti Benefic Owned	Securities Beneficially Owned Following		n: Direct r Indirect sstr. 4)	7. Nature of Indirect Beneficial Ownership				
										Code	v	Amount	(A) or (D) Price		Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock 11/20/						/2023			M		8,503(503 ⁽¹⁾ A \$2		56 2,333,900 ⁽²⁾			D		
Common Stock 11/20/					0/2023	/2023			M		4,244 ⁽¹⁾ A \$		\$25.9	2 2,338,144			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)	rivative Conversion Date Execution Date, T curity or Exercise (Month/Day/Year) if any			ansaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e S Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exe	e ercisable		Expiration Date	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$23.56	11/20/2023			M			8,503	12/1	19/2018 ⁽	3) 1	2/19/2025	Common Stock	8,503	\$0	4,244	ļ	D	
Stock Option (Right to	\$25.92	11/20/2023			M			4,244	12/1	19/2018 ⁽	3)	2/19/2023	Common Stock	4,244	\$0	0		D	

Explanation of Responses:

- 1. Represents shares acquired upon exercise of options by the Reporting Person, as reported in Table II.
- 2. This amount reflects the amendment of 2,143 securities reportedly sold on Form 4 dated 5/18/23 to the amount actually sold on that date which was 21,431.
- 3. 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 vests in equal annual installments over the remaining four years, with the final vesting occurring on the 11th month after the fourth anniversary.

11/21/2023 /s/ David Hissong

** 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.