SEC For	rm 4 FORM	Δ			TES S	FCURITI	ES AN		ХСНА	NG	FC	омм	ISSION					
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549													OMB APPROVAL				
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									Estim			er: verage burde sponse:	3235-0287 en 0.5	
transac contrac the pur securit intende defens	rchase or sale of ies of the issue ed to satisfy the	pursuant to a written plan for of equity r that is					meaun				•0							
1. Name and Address of Reporting Person <sup>*</sup> Roberts David B					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) Director 10% Owner Officer (give title Other (specify					
		rst) ASCULAR, INC UE		3. Date of Earliest Transaction (Month/Day/Year) 12/20/2024								Officer (give title Other (specify below) below)     President and Director						
(Street) BURLINGTON MA 01803 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)								<ul> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> <li>Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting Person</li> </ul>					
		Tab	le I - Noi	n-Deriv	vative S	ecurities Ac	quired	, Dis	posed o	of, or	Bene	eficial	ly Owned	ł				
Da				2. Trans Date (Month/	action Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Yea	Code	action (Instr.		ties Acquired (A) or d Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amount	() (I	A) or D)	Price	Transac	Transaction(s) (Instr. 3 and 4)			(1130. 4)	
Common Stock 12/20					)/2024		М		17(1)		Α	<b>\$0</b> <sup>(1)</sup>	<b>\$0</b> <sup>(1)</sup> 14,657			D		
Common Stock 12/20/					)/2024		F		115(2	2)	D	<b>\$92</b> .1	2 14	,542		D		
		Т				curities Acq ls, warrants							Owned					
1. Title of Derivative Security (Instr. 3)	ve Conversion Date Execution or Exercise (Month/Day/Year) if any		ed 4. 1 Date, Transaction Code (Instr		5. Number n of	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5) Beneficia Owned Following Reported Transacti (Instr. 4)		s Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)		

Explanation of Responses:

(3)

Dividend

Equivalent

Rights

1. Represents shares acquired upon release of dividend equivalent rights, as reported in Table II, on a one-for-one basis.

2. These shares represent shares withheld by the Issuer to satisfy tax withholding obligations incurred upon the vesting of restricted stock units awarded to the reporting person on December 20, 2019. This transaction is considered an exempt sale pursuant to Rule 16b-3(e) promulgated under the Securities Exchange Act of 1934.

and 5)

(A)

(D)

17<sup>(3)</sup>

3. These dividend equivalent rights were released in connection with the vesting of a restricted stock unit award granted on December 20, 2019. Each dividend equivalent right is the economic equivalent of one share of the Issuer's common stock.

Date Exercisable

(3)

Expiration Date

(3)

Title

Common Stock

/s/ John Pitfield

Amount or Number

of Shares

17

\$<mark>0</mark>

2.0733

12/26/2024

D

\*\* 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).

12/20/2024

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code V

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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.