FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Vashington, [	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person*  Roberts David B  (Last) (First) (Middle)  C/O LEMAITRE VASCULAR, INC. 63 SECOND AVENUE  (Street)  BURLINGTON MA 01803  (City) (State) (Zip)						2. Issuer Name and Ticker or Trading Symbol LEMAITRE VASCULAR INC [ LMAT ]  3. Date of Earliest Transaction (Month/Day/Year) 12/02/2023  4. If Amendment, Date of Original Filed (Month/Day/Year)  Rule 10b5-1(c) Transaction Indication										S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner     X Officer (give title Other (specify below)				
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														ed to						
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				ction	2/ Ex	A. Deemed Execution Date, f any Month/Day/Year)		,,	3. 4. Secu Transaction Dispose Code (Instr. 5)		4. Securi Disposed	rities Acquired (A) ed Of (D) (Instr. 3, 4		(A) or	5. An Secu Bene Own	ount of rities ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code V	_	Amount		(A) or (D)	Price	(Instr	rted action(s) . 3 and 4)			(Instr. 4)	
Common Stock 12/02/2						2023			M		8(1)		A	<b>\$0</b> <sup>(1</sup>	)	11,246		D		
Common Stock 12/02/2					/2023	2023			F		155 <sup>(2)</sup> D		D	\$53.8	33	11,091		D		
		Т	able II -									osed of onverti				/ Owne	d			
1. Title of Derivative Security (Instr. 3)	ve Conversion of Exercise Price of Derivative Security  Date (Month/Day/Year)  Execution Date, if any (Month/Day/Year)		4. Transa Code (I 8)	Instr.	str. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exi (Md	Date Exercisable and xpiration Date Month/Day/Year)  ate Expiration xercisable Date			Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)  Amount of Num piration of of		amount	8. Price Derivativ Security (Instr. 5)	derivative Securities Beneficia Owned Following Reported	Following Reported Transaction(s)		11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

(3)

Dividend

Rights

Equivalent

- 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 2, 2020. This transaction is considered an exempt sale pursuant to Rule 16b-3(e) promulgated under the Securities Exchange Act of 1934.

8(3)

3. These dividend equivalent rights were released in connection with the vesting of a restricted stock unit award granted on December 2, 2020. Each dividend equivalent right is the economic equivalent of one share of the Issuer's common stock.

(3)

/s/ David C. Hissong 12/05/2023 \*\* Signature of Reporting Person Date

\$<mark>0</mark>

21.9201

D

Commo

Stock

(3)

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).

12/02/2023

\*\* 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.