FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								
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0.5

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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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1. Name and Address of Reporting Person* Kamke Trent G					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 Officer (give title Other (specify						
	st) (First) (Middle) O LEMAITRE VASCULAR , INC. SECOND AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 06/06/2019							X Office (give tide below) below) Senior V. P., Operations					
(Street) BURLINGTON MA 01803 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tab	le I - Non-D	erivativ	e Se	curiti	es A	cquired,	Dis	osed	of, or Be	eneficia	lly Own	ed					
Date				Transaction te onth/Day/Yo	ear) i	Execution f any	A. Deemed kecution Date, any lonth/Day/Year)		r, Transaction Dispose Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3, 4		nd Secui Benet Owne	icially d Following	Forn (D) o	n: Direct or Indirect instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) (D)	Price	Trans	Reported Transaction(s) (Instr. 3 and 4)					
		Т	able II - Der (e.g					uired, D s, option					y Owned	i					
L. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Code		of		6. Date Exercisab Expiration Date (Month/Day/Year)			and 7. Title and Amount of Securities Underlying Derivative Se (Instr. 3 and 4		8. Price o Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable		opiration	Title	Amount or Number of Shares							
Dividend Equivalent Rights	(1)	06/06/2019		A		4		(1)		(1)	Common Stock	4	\$0	24		D			
Dividend Equivalent Rights	(2)	06/06/2019		A		2		(2)		(2)	Common Stock	2	\$0	4		D			
Dividend Equivalent Rights	(3)	06/06/2019		A		4		(3)		(3)	Common Stock	4	\$0	7		D			

Explanation of Responses:

- 1. These dividend equivalent rights accrued on a restricted stock unit award granted on 7/25/2016 and vest proportionately with such award. Each dividend equivalent right is the economic equivalent of one share of the Issuer's common stock.
- 2. These dividend equivalent rights accrued on a restricted stock unit award granted on 12/22/2017 and vest proportionately with such award. Each dividend equivalent right is the economic equivalent of one share of the Issuer's common stock.
- 3. These dividend equivalent rights accrued on a restricted stock unit award granted on 12/19/2018 and vest proportionately with such award. Each dividend equivalent right is the economic equivalent of one share of the Issuer's common stock.

/s/ Laurie A. Churchill, Attorney-in-fact 06/10/2019

** 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.