FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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l	hours per response:	0.5						

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

Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol LEMAITRE VASCULAR INC [ LMAT ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Roberts David B					1=-	ELIMITICE VASCOLAR INC [ LMAI ]									X Direct	or		10% O	wner	
(Last)	•	· ·	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/22/2019										X Officer (give title below)  President a			specify	
C/O LEMAITRE VASCULAR, INC.						12/22/2013										restació		1100101		
63 SECOND AVENUE																				
(Street) BURLINGTON MA 01803						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person					
					-										Form filed by More than One Reporting Person					
(City)	(St	ate) (	Zip)												reisc	,,,,				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
D D			Date	e		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. r) 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				Benefic Owned	ies cially Following	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(/	A) or O)	Price		ed ction(s) 3 and 4)			(Instr. 4)	
Common Stock				12/22	22/2019				М		6(1)		A	\$ <mark>0</mark> (1	30	5,841		D		
Common Stock 12/2				12/22	2/2019	/2019			F		1200	2)	D	\$35.4	8 30	36,721		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)	3A. Deeme Execution if any (Month/Da	ed Date,	4. Transa Code ( 8)	ction	5. Number of		6. Date Exe Expiration (Month/Day	rcisa Date	ble and	7. Title Amour Securi Underl Deriva	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)		Date Exercisable		opiration	Title	OI N Of	umber						
Dividend Equivalent	(3)	12/22/2019			M			6 <sup>(3)</sup>	(3)		(3)	Comm Stock		6	\$0	16		D		

## **Explanation of Responses:**

- 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 22, 2017. This transaction is considered an exempt sale pursuant to Rule 16b-3(e) promulgated under the Securities Exchange Act of 1934.
- 3. These dividend equivalent rights were released in connection with the vesting of a restricted stock unit award granted on December 22, 2017. Each dividend equivalent right is the economic equivalent of one share of the Issuer's common stock.

/s/ Laurie A. Churchill, Attorney-in-fact 12/26/2019

\*\* 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.