FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
wasnington,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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

1. Name and Address of Reporting Person* Ross Bridget A						2. Issuer Name and Ticker or Trading Symbol LEMAITRE VASCULAR INC [LMAT]									(Ch	eck all appl	icable) or	10% Owner		vner	
(Last) C/O LEN	•	ASCULAR, INC	(Middle)		12/	Date of Earliest Transaction (Month/Day/Year) 12/11/2023 4. If Amendment, Date of Original Filed (Month/Day/Year)										below			Other (s below)		
63 SECOND AVENUE (Street)						II Alliendineni, Date di Original Filed (Montubbay/Tear)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
, ,	IGTON M	ÍA (01803		Rı	Rule 10b5-1(c) Transaction Indication															
(City)	(S	tate)	(Zip)			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.											ed to				
		Tabl	le I - Noi	n-Deriv	vative	Se	curitie	es Ac	cqu	ired, [Disp	osed o	of, or l	3ene	ficial	ly Owne	d				
Date			2. Trans Date (Month/		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)				Benefici	es ally Following	Form (D) o	r Indirect r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	Amount (A) or (D)		Price	Transac (Instr. 3	tion(s)			(111501. 4)							
Common Stock 12/1					1/2023	2023			M		2 ⁽¹⁾ A		\$0 (1)	1,	1,683		D				
Common Stock 12/12					2/2023	3				M		1(1)		A	\$0 (1)	1,684			D		
		Т										sed of onverti				Owned					
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	Date,	4. Transaction Code (Instr 8)		n of		Exp	5. Date Exercisa Expiration Date Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)		e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	te ercisable		cpiration ate	Title	or Nu of	ımber						
Dividend Equivalent Rights	(2)	12/11/2023			М			2 ⁽²⁾		(2)		(2)	Commo		2	\$0	6.4383	3	D		
Dividend Equivalent Rights	(3)	12/12/2023			M			1 ⁽³⁾		(3)		(3)	Commo		1	\$0	4.986	7	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 dividend equivalent rights were released in connection with the vesting of a restricted stock unit award granted on December 11, 2021. Each dividend equivalent right is the economic equivalent of one share of the Issuer's common stock.
- 3. These dividend equivalent rights were released in connection with the vesting of a restricted stock unit award granted on December 12, 2022. Each dividend equivalent right is the economic equivalent of one share of the Issuer's common stock.

/s/ David C. Hissong

12/13/2023

** 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.