FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Last)	tre Corne	rst) (* Middle)		2. Issuer Name and Ticker or Trading Symbol LEMAITRE VASCULAR INC [LMAT] 3. Date of Earliest Transaction (Month/Day/Year) 07/25/2016									heck all X D C	nship of Reporting F I applicable) Director Officer (give title pelow)		10% C	wner	
C/O LEMAITRE VASCULAR, INC 63 SECOND AVENUE (Street) BURLINGTON MA 01803						4. If Amendment, Date of Original Filed (Month/Day/Year)								ne) <mark>X</mark> F	′				
(City)	(5		Zip)	- Di.				- 4	i	•		D	<u> </u>		1				
					tion y/Year) ive Se	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transacti Code (Ins 8) Code	on etr.	4. Securities Acquired Disposed Of (D) (Instr. and 5) Amount (A) or (D) Osed of, or Benefic		or Price	or 5 Se Be Ow Fo Re	Following Reported Transaction(s) (Instr. 3 and 4)		Ownership orm: Direct) or direct (I) estr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ise (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		uts, Calls, 4. Transaction Code (Instr. 8)		5. n Number		6. Options, conve 6. Date Exercisable an Expiration Date (Month/Day/Year)					8. Price of Derivat Securit (Instr.	derivati ive Securit y Benefic	ve ies ially ng ed ction(s)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisable	Exp Date	iration e	Title	or Number of Shares						
Stock Option (Right to Buy)	\$14.13	07/25/2016			A		7,500		07/25/2016 ⁽¹⁾	07/2	25/2021	Common Stock	7,500	\$0.00	7,5	00	D		

Explanation of Responses:

1. This option is exercisable and vests over a three-year period at a rate of 33 1/3% on the first anniversary of the date listed in the table, with the balance vesting in equal annual installments over the remaining two years.

Remarks:

/s/ Laurie Churchill, Attorneyin-fact 07/27/2016

** 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.