FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Pellegrino Joseph P JR (Last) (First) (Middle) C/O LEMAITRE VASCULAR, INC. 63 SECOND AVENUE (Street) BURLINGTON MA 01803						3. D 12/	Issuer Name and Ticker or Trading Symbol LEMAITRE VASCULAR INC [LMAT] 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2019 4. If Amendment, Date of Original Filed (Month/Day/Year)								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner X Officer (give title Other (specify below) Chief Financial Officer 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting				
(City) (State) (Zip)															Person				
			Table	e I - 1	Non-Deriv	ative/	Sec	uritie	s Ac	quire	ed, Di	sposed o	f, or E	Benefici	ally	Owne	ed		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye							Execution Date,						curities Acquired (A) or osed Of (D) (Instr. 3, 4 an		5) Secur Bene		ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
										Code	v	Amount	(A) or (D)	Price		Trans	action(s) 3 and 4)		(instr. 4)
Common Stock 12/31/201)19				S		1,105(1)	D	\$36.10	1033(2)		11,021	D	
Common Stock 01/02/202)20	0			S		710(1)	D	\$36.06	\$36.0667 ⁽³⁾		10,311	D	
			Tal	ble II								osed of, convertib				vned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercis Price of Derivative Security	on Date se (Mor	nth/Day/Year)	Execu	eemed Ition Date, h/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expir	te Exer ration D th/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	\v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	of Shares					

Explanation of Responses:

- 1. This transaction was effected pursuant to a Rule 10b5-1 trading plan established by the Reporting Person.
- 2. The price reported in Column 4 is a weighted average price. The transaction was executed in multiple trades ranging from \$36.01 to \$36.22. The Reporting Person undertakes to provide to the Issuer, any securityholder of the Issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares and price at which the transaction was effected.
- 3. The price reported in Column 4 is a weighted average price. The transaction was executed in multiple trades ranging from \$36.00 to \$36.17. The Reporting Person undertakes to provide to the Issuer, any securityholder of the Issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares and price at which the transaction was effected.

/s/ Laurie A. Churchill, 01/02/2020 Attorney-in-fact

** 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.