SEC Form 4																	
FORM 4	UNITED STATES SECURITIES AND EXCHANGE COMMIS Washington, D.C. 20549										SSION	SION OMB APPROVAL					
Section 16. Form 4 or Form 5 obligations may continue. See				AT OF CHANGES IN BENEFICIAL OWNER d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940									Estimated average burden			11	
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.			01380		) or th	e invesiment	Cor	npany Act	01 194	.0							
1. Name and Address of Reporting Person* LeMaitre George W				2. Issuer Name and Ticker or Trading Symbol <u>LEMAITRE VASCULAR INC</u> [ LMAT ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) C/O LEMAITRE VASCULAR, INC.				3. Date of Earliest Transaction (Month/Day/Year) 12/06/2024									Officer (give title Other (specify below) Chairman and CEO				
63 SECOND AVENUE				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable				
(Street) BURLINGTON MA 01803												Form filed by One Reporting Person     Form filed by More than One Reporting     Person					
(City) (State)											reison						
T 1. Title of Security (Instr. 3)	able I - Nor	1-Derivat		ecuritie		cquired, C	)is	4. Securit				5. Amour	nt of	6. Ov	vnership	7. Nature of	
Dat					on Dat Day/Ye	e, Transac Code (In			posed Of (D) (Instr. 3,			Securitie Beneficia Owned F Reported	s Illy ollowing	Form (D) or	: Direct r Indirect str. 4)	Indirect Beneficial Ownership (Instr. 4)	
					Code	v	Amount	(0)		Price	Transaction(s) (Instr. 3 and 4)				(		
			/2024 A 4,945 <sup>(1)</sup> A							\$0							
						s, options						Owned					
1. Title of Derivative Security (Instr. 3) 2. 3. Transaction Date Price of Derivative Security (Month/Day/Yea	3A. Deemed Execution D if any (Month/Day)	ate, Tran Cod	saction e (Instr.		ive ies ed ed Instr.	6. Date Exer Expiration D (Month/Day/		7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
		Cod	e V	(A)	(D)	Date Exercisable		Expiration Date	Title		Amount or Number of Shares						
Stock         Option         \$101.12         12/06/2024           Buy)         Buy         12/06/2024         12/06/2024		А		28,377		12/06/2024 <sup>(2</sup>	2)	12/06/2031	Com Sto		28,377	\$ <u>0</u>	28,37	7	D		
Explanation of Responses: 1. Represents a restricted stock unit award that installments over the remaining three years. T	vests on a time-	based schedu	ile as fo	llows: 25%	o of the	e award vests c	n th	e anniversar	y of th	e grant	date liste	d in the table,	with the ba	lance v	vesting in equ	al annual	

installments over the remaining three years. This award includes a provision for the withholding of shares by the Issuer to pay the withholding taxes due on each vesting date.

2. This option is exercisable and vests over a four-year period at a rate of 25% on the first anniversary of the date listed in the table, with the balance vesting in equal annual installments over the remaining three years.

/s/ John Pitfield

\*\* Signature of Reporting Person

Date

12/10/2024

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\ast}$  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.