Instruction 1(b)

## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 20549
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Check this box if no longer subject to	STATEMENT OF CI
Section 16. Form 4 or Form 5	
obligations may continue. See	

## HANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 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*  Milstead Byron Wayne						2. Issuer Name and Ticker or Trading Symbol  LATTICE SEMICONDUCTOR CORP [ LSCC ]										ck all applic Directo Officer	tionship of Reporting all applicable)  Director  Officer (give title below)		g Person(s) to Issuer  10% Owner  Other (specify below)		
(Last) 5555 N.E	(Fi E. MOORE	CT.		Date o /30/2		st Tran	nsact	tion (Mor	nth/C	ay/Year)		, ,	VP Corp, General Counsel								
(Street) HILLSBORO OR 97124				-   4. l <sup>·</sup>	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line)	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S		(Zip) 	n-Deriv	vative	e Sec	curiti	es Ac	cau	ired. C	)isi	osed o	of. or B	ene	ficially	y Owned	1				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Ye		ion 2A Ex //Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		(A) or	5. Amou Securitie Beneficie Owned F	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
										Code	v	Amount	(A) (D)	or	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)	
Common	Stock		03/30/2015 M 972 A \$0.0 <sup>(1)</sup> 23,053 D							D											
Common	Stock			03/3	0/201	5				<b>F</b> <sup>(2)</sup>		405	I	)	\$6.46	22,648		8 D			
		7	Table II -									sed of, onvertil				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		6. Date Exercisal Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e rcisable		xpiration ate	Title	or Nu of	umber						
Restricted Stock Unit	\$0.0 <sup>(3)</sup>	03/30/2015			M			972	03/3	30/2013 <sup>(4</sup>		(5)	Commo Stock	n !	972	\$0.0	65,158	3	D		

## **Explanation of Responses:**

- 1. Restricted Stock Units no purchase price for this transaction.
- 2. These shares were retained by the Issuer in order to meet the tax withholding obligations of the Reporting Person in connection with the vesting of an installment of the restricted stock units. The amount retained by the Issuer was not in excess of the amount of the tax liability.
- 3. Each Restricted Stock Unit (RSU) represents a right to receive one share of the Issuers common shares without payment of specific consideration.
- 4. This grant of Restricted Stock Units (RSUs) vest as follows: 25% of the RSUs will vest upon the one-year anniversary of the grant date and an additional 6.25% of the RSUs vest each three months thereafter until 100% of the RSU grant is vested.
- 5. Not applicable.

03/30/2015 /s/ Byron W. Milstead

\*\* 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.