FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20040	OMB APP	ROVAL
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028

Estimated average burden hours per response: 0.5

## 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*  Milstead Byron Wayne						2. Issuer Name and Ticker or Trading Symbol  LATTICE SEMICONDUCTOR CORP [ LSCC ]									(Ch	elationship o eck all applio Directo	cable)	g Pers	son(s) to Iss 10% Ov Other (s	vner	
(Last) 5555 NE	(Fi	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/21/2016								_	below)		neral	below)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(Street)			0=101		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (C Line)															
(City)			97124 (Zip)			X Form filed by One Reporting F Form filed by More than One F Person							•								
		Tab	le I - Noi	n-Deriv	/ativ	e Se	curit	ies A	cqu	ıired, I	Disp	osed o	f, or	Bene	eficial	y Owned	<u> </u>				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		е,	Code (Instr. 5)						Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
										Code	v	Amount		(A) or (D)	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)	
Common	Stock			03/23	1/201	6				M		1,409	(1)	A	\$0	22,	,988		D		
Common	Stock			03/2	1/201	16				F <sup>(2)</sup>		587		D	\$6.2	22,	,401		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,		ransaction ode (Instr.		n of		6. Date Exercisal Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially 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)	Dat Exe	te ercisable		expiration Date	Title	N O	Amount or Number of Shares						
Restricted Stock Unit - (RSU)	\$0 <sup>(3)</sup>	03/21/2016			M			1,409	03/2	21/2015 <sup>(</sup>	4)	(5)	Com	mon ock	1,409	\$0	44,069	9	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 the 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)vests 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

03/22/2016 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.