FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## 3.. ,

OMB APPROVAL

OMB Number: 3235-0287
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).

## 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

1. Name and Address of Reporting Person*  Milstead Byron Wayne							2. Issuer Name and Ticker or Trading Symbol LATTICE SEMICONDUCTOR CORP [ LSCC ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
																Officer	(give title		Other (s		
(Last) (First) (Middle) 5555 N.E. MOORE CT.						3. Date of Earliest Transaction (Month/Day/Year) 12/25/2015									X	below) below)  VP Corp, General Counsel					
						If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable					
(Street)						(									Line)	ine)					
HILLSBORO OR 97124														X		•	•	Reporting Person than One Reporting			
(City) (State) (Zip)																Person		e iliali	Опе Кери	ung	
		Tab	le I - No	n-Deriv	vativ	e Se	curit	ies A	cqu	ired, I	Dis	osed o	f, or Be	nefic	cially	Owned	l				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		₃,	3. Transac Code (Ir 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securitie Beneficia Owned F		es ally Following	Form	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
								-		Code	v	Amount	(A) or (D)	Pri	ce	Reported Transact (Instr. 3 a	tion(s)	.,,		(Instr. 4)	
Common Stock 12/25/2						2015				M		1,447	A	\$	0.0(1)	16,	,683		D		
Common Stock 12/25/2						5				F <sup>(2)</sup>		513	D	\$(	5.285	16,	,170		D		
		-	Гable II -										or Ben			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. Transa Code ( 8)		of		Exp	Date Exe piration I ponth/Day	Date	Amount ) Securitie Underlyi		nt of ties lying tive Security		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	e ercisable		Expiration Date	Title	Amo or Num of Shar	ber						
Restricted Stock Unit (RSU)	\$0.0 <sup>(3)</sup>	12/25/2015			M			1,447	03/	25/2014 <sup>(</sup>	4)	(5)	Common Stock	1,4	47	\$0.0	54,647	,	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.

<u>/s/ Byron W. Milstead</u> <u>12/28/2015</u>

\*\* 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.