FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington

Washington, D.C. 20049	OMB APPROVA				
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	323			

- 1									
	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).

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]										(Check all applied Director Officer		or (give title		on(s) to Issuer 10% Owner Other (specify	
(Last)	(Fi 5TH AVE.,	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/06/2019										Λ	below) VP	Corp, Ge	below)		
(Street) PORTLA			97204 (Zip)		4. II	4. If Amendment, Date of Original Filed (Month/Day/Year)									Indiv ne) X						
		Tab	le I - Nor	า-Deriv	ative	e Se	curit	ies A	cqu	ired, C	Disp	osed o	f, o	r Ben	eficia	lly	Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/L				ar) l	2A. Deemed Execution Date, if any (Month/Day/Year)		е,	Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			i (A) or :. 3, 4 ar	4 and Securitie Benefici Owned F		es For ally (D) Following (I)		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	ount (A) or (D)		Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 02/06/					5/201	2019				M		2,050) A \$		\$0.0) (1)	16,	16,373		D	
Common Stock 02/06/					5/201	/2019				F ⁽²⁾		795	D \$7		\$7.	96	15,578		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. Deemee Execution I if any (Month/Day	Date, 1	I. Fransaction Code (Instr. 3)		n of		Exp	6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4)			D Si (li	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	V	(A)	(D)	Date Exe	e ercisable		expiration Date	Title		Amoun or Numbe of Shares						
Restricted Stock Unit (RSU)	\$0.0 ⁽³⁾	02/06/2019			M			2,050	02/0	06/2016 ⁽⁴	.)	(5)		nmon ock	2,050		\$0.0	72,033	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.

02/07/2019 /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.