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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See | | | | | | NT OF CHANGES IN BENEFICIAL OWNERSHIP | | | | | | | | | Estim | OMB Number: 3235-0287 Estimated average burden hours per response: 0.5 | | |
|--|--|---------|----------------------------------|--|---|--|--|---|-------------------------------|--------|--|--|---|--|---|--|---|----------|
| 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 | | | | | | | | 0.5 | | | | | | | | | | |
| 1. Name and Address of Reporting Person* <u>ANDERSON JAMES ROBERT</u> | | | | 2. Issuer Name and Ticker or Trading Symbol <u>LATTICE SEMICONDUCTOR CORP</u> [LSCC] | | | | | | | | Check al | onship of Reporting all applicable) Director Officer (give title | | 10% Othe | Own r (spe | er | |
| (Last) 5555 NI | (Fi E MOORE (| , | vliddle) | | 3. Date 11/28/ | | | action (N | n (Month/Day/Year) | | | | | A below) below) President & CEO | | | v) | |
| (Street) HILLSE | ORO O | r 9 | 7124 | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Ap Line) X Form filed by One Reporting Perso Form filed by More than One Repo | | | | erson | | |
| (City) | (Si | ate) (2 | Zip) | | Person | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) Date (Month/Da | | | | | Execution Date, | | | 3. 4. Securities Acquired (Transaction Code (Instr. 8) 8) 4. Securities Acquired (Disposed Of (D) (Instr. 5) | | | | | | es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | of Be Ov | Nature Indirect eneficial wnership istr. 4) | |
| | | | | | | | | Code | v | Amount | (A) o (D) | r Pric | Transaction/a | | tion(s) | | | ເຈເເ. 4) |
| Commor | Common Stock 1 | | | 11/28/ | 2022 | | | G | v | 3,000 | D | \$(| \$ 0.0 764,534 | | | 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) | rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any | | 4. Transact Code (In 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | Amount of De Securities Se | | 8. Pric Deriva Securi (Instr. | vative derivative urity Securities | | y Direct (D or Indirec (I) (Instr. | ip (19) (21 (| 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

| | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
|-----------|---------------|-----|------|---|-----|-----|---------------------|--------------------|-------|--|
| Explanati | on of Respons | es: | | | | | | | | |

By: Tracy Feanny, Attorney in

11/29/2022 Fact For: James R Anderson

** 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.