FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL												
	OMB Number: 3235-02												
	Estimated average burden												
1	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

Name and Address of Reporting Person* Elashmawi Esam (Last) (First) (Middle) 5555 NE MOORE COURT						2. Issuer Name and Ticker or Trading Symbol LATTICE SEMICONDUCTOR CORP [LSCC] 3. Date of Earliest Transaction (Month/Day/Year) 09/24/2022									(Che	5. Relationship of Reporting P (Check all applicable) Director X Officer (give title below) SVP, Mktg &			10% Owner Other (specify below)	
(Street) HILLSB		tate)	97124 (Zip)		-	4. If Amendment, Date of Original Filed (Month/Day/Year)										ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
			le I - Noi			_			·		isp					y Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)		е,	Transaction Dispo		Disposed	urities Acquired (A) sed Of (D) (Instr. 3, 4				es For ally (D) Following (I) (n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
										Code \	,	Amount	(A) or (D) Pri		rice	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)
Common Stock 09/24/						2022			М		8,032	A	-	\$0.0 ⁽¹⁾	193	,714		D		
Common Stock 09/24/					4/202	′2022				F ⁽²⁾		3,983 D		4	\$48.59	189	189,731		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 if any (Month/Day	Date,	4. Transa Code (8)				Exp	Oate Exerc biration D onth/Day/	ate		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)		i C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	te ercisable		Expiration Date	Title	Nu	mber ares					
Restricted Stock Unit (RSU)	\$0.0 ⁽³⁾	09/24/2022			M			8,032	02/1	19/2022 ⁽⁴		(5)	Common Stock	8,	032	\$0.0	41,193 ⁽	6)	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. Restricted Stock Units no exercise price for this transaction.
- 4. Grants of Restricted Stock Units (RSUs) vest as follows: 25% of the RSUs will vest on the first anniversary of the date of grant, and an additional 6.25% of the RSUs shall vest at the end of each three month period thereafter.
- 5. Not applicable.
- 6. The number of shares beneficially owned has been adjusted pursuant to an internal review of the Reporting Person's holdings.

By: Tracy Feanny, Attorney in Fact For: Esam Elashmawi 09/27/2022

** 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.