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									
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* ANDERSON JAMES ROBERT						2. Issuer Name and Ticker or Trading Symbol LATTICE SEMICONDUCTOR CORP [LSCC]								(Che	ck all applic Directo	able)	g Perso	on(s) to Issu 10% Ow Other (s	ner
(Last) (First) (Middle) 5555 NE MOORE COURT						3. Date of Earliest Transaction (Month/Day/Year) 02/02/2021								X	below)	President & C		below)	
(Street) HILLSBORO OR 97124					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S		(Zip)																
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					action		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A)		A) or	5. Amour Securitie Beneficia Owned F	s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or I	Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock				02/02	02/2021				F ⁽¹⁾		2,805])	\$43.89	428,942			D	
Common Stock 02/02						2021		М		7,042		1	\$0.0(2)	435,984			D		
Common Stock 02/14/						2021			F ⁽¹⁾		9,979])	\$48.4 4	426,005		D		
Common Stock 02/14/					4/202	/2021			М		22,748	3 A \$0.0		\$0.0 ⁽²⁾	448,753		D		
			Table II -								osed of, convertil				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/Day	Date,	4. Transaction Code (Instr. 8)				6. Date Exercis: Expiration Date (Month/Day/Yea		е	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	or No of	umber					
Restricted Stock Unit (RSU)	\$0.0 ⁽³⁾	02/02/2021			M			7,042	08/02/20	20 ⁽⁴⁾	(5)	Comm Stock		7,042	\$0.0	442,00	3	D	
Restricted Stock Unit	\$0.0 ⁽³⁾	02/14/2021			M			22,748	02/14/20	21 ⁽⁴⁾	(5)	Comm		2,748	\$0.0	419,25	5	D	

Explanation of Responses:

- 1. 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.
- 2. Restricted Stock Units no purchase price for this transaction.
- 3. Each Restricted Stock Unit (RSU) represents a right to receive one share of the Issuers common shares without payment of specific consideration.
- 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

(RSU)

By: Byron W. Milstead. 03/17/2021 Attorney in 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.