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FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	Check this box if no longer subject to
	Section 16. Form 4 or Form 5
	obligations may continue. See
	Inchrication 4/h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). S	ee Instruction 1	0.																	
1. Name and Address of Reporting Person*  Blanchfield Paul						2. Issuer Name <b>and</b> Ticker or Trading Symbol Lantheus Holdings, Inc. [ LNTH ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Dianch		<u> </u>									Direc			10% O	-				
-											<b>V</b>	Office below	er (give title		Other (	specify			
(Last)	(Fir	3. Date of Earliest Transaction (Month/Day/Year)									50.01	•	sident	,					
C/O LA	NTHEUS H	11/14/2024										110.	sidein	L					
201 BUF	RLINGTON																		
		4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable								
(Street)														Line)					
BEDFORD MA 01730													<b>V</b>	Form filed by One Reporting Person					
BEDIORD IVIII 01730															Form filed by More than One Reporting Person				
(City)	(St	ate) (Ž	Zip)																
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	ficiall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				4 and Securities Beneficial		ties cially I Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or Pi	rice	Transa	action(s) 3 and 4)			(111501. 4)
Common	2024	024			S <sup>(1)</sup>		2,000	D	\$	79.65	97	97,092(2)		D					
Common	2024				G <sup>(1)</sup>		355 D			\$0.00	96,737			D					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
				(e.g., pu	its, ca	alis, v	warra	ants,	optioi	ns, c	convertib	le se	curit	ies)					
1. Title of Derivative Security (Instr. 3)	ve Conversion Date y or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 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)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price o Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	per					

## **Explanation of Responses:**

- 1. The transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 1, 2024.
- 2. Includes 112 shares acquired under the LNTH employee stock purchase plan on September 13, 2024.

/s/ Daniel M. Niedzwiecki, attorney-in-fact

11/18/2024

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.