## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average	burden							
hours per respense	. 0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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 10b5-1(c). See Instruction 10.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

See ins	struction 10.																			
Name and Address of Reporting Person*     Morrow Phuong Khanh				2. Issuer Name <b>and</b> Ticker or Trading Symbol  Lantheus Holdings, Inc. [LNTH]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)    Director 10% Owner							
Worldw I fluorig Knami															Directo	or		10% Ov	vner	
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/07/2025								1	Officer (give title Other (s below) below)				specify				
C/O LANTHEUS HOLDINGS, INC.					02/	07/2	023													
201 BUE	LINGTON	ROAD SOUTI	H BUILD	ING																
201 BURLINGTON ROAD, SOUTH BUILDING				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable							
(Street)						Line)    Form filed by One Reporting Person														
BEDFO	RD M	Δ	01730											1		,		Ü	I	
DEDITO	XD IVI	Α	01730												Form filed by More than One Reporting Person					
(0.1.)	(0)		( <b>7</b> : )																	
(City)	(Si	tate) (	(Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of S	Security (Inst	tr. 3)		2. Transa	ction		2A. Deem		3. 4. Securities Acquired (A)									7. Nature		
Date (Month/Da								cution Date,		Transaction Di		sposed Of (D) (Instr. 3,		, 4 and	Securitie Benefici	ally (D) of Following (I) (II		or Indirect Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)	
					(Month/Day/Ye		ay/Year			<u> </u>			Owned F Reported							
									Code	v	Amount	ount (A) or (D)		Price	Transact	Transaction(s) (Instr. 3 and 4)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Common Stock 02/07/				/2025			Α		563	563 A S		\$0.00	563			D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
		-									onverti									
1. Title of	2.	3. Transaction	3A. Deeme	d 4			5. Num	her	6. Date Ex	ercisa	hle and	7. Title	nd		8. Price of	9. Number	r of	10.	11. Nature	
Derivative	Conversion or Exercise	Date	Execution	Date, T	ransa		on of		Expiration	xpiration Date A		Amount of Securities		- 1	Derivative	derivative		Ownership Form:	of Indirect Beneficial	
Security (Instr. 3)	Price of	(Month/Day/Year)	if any (Month/Day				ties Underly			ing	- 1	Security (Instr. 5)	Securities Beneficial	lly Direct (D)	Direct (D)	Ownership				
	Derivative Security					Acquired Deriva (A) or (Instr.:										Owned Following		or Indirect (I) (Instr. 4)	(Instr. 4)	
	,					Disposed of (D) (Instr. 3, 4 and 5)		sed	(msu. 5 and 4)							Reported Transaction(s)		(,, (		
								Instr. 3, 4							(Instr. 4)	on(s)				
				L				_												
													Am	ount						
										_			Nu	mber						
				c	ode	v	(A)		Date Exercisabl		xpiration ate	Title	of Sh:	ares						
Stock										T										
Option (right to	\$88.71	02/07/2025			Α		1,017		02/07/202	6 0	2/07/2035	Commo Stock	1,	017	\$0	1,017		D		

Explanation of Responses:

/s/ Eric M. Green, attorney-in-

fact

\*\* Signature of Reporting Person Date

02/11/2025

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).