FORM 4

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

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

Washington,	D.C.	20549
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<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL										
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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*     Heino Mary Anne						2. Issuer Name and Ticker or Trading Symbol Lantheus Holdings, Inc. [ LNTH ]									(Ch	5. Relationship of Report (Check all applicable)  X Director			son(s) to Iss 10% Ov		
(Last)	,	*	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/09/2024									Officer below)	(give title		Other (s below)	specify		
		OLDINGS, INC			4. If Amendment, Date of Original Filed (Month/Day/Year)						Lin	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person									
(Street) BEDFOI	RD M	A	01730													Form filed by More than One Reporting Person					
(City)	(Si	tate)	(Zip)		Check this box to indicat				dicate	Transaction Indication  icate that a transaction was made pursuant to a contract, instruction or written plan that is intended defense conditions of Rule 10b5-1(c). See Instruction 10.								d to			
		Tab	le I - Noi	n-Deriv	ative	e Se	curitie	s Ac	qui	ired, [	Disp	osed c	of, o	r Ber	neficial	ly Owne	d				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			ar) l	2A. Deemed Execution Date, if any (Month/Day/Year)		,	Code (Instr.		4. Securities Acquired (ADisposed Of (D) (Instr. 35)		d (A) or r. 3, 4 and	Benefici Owned	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount		(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
Common	Stock			05/09	9/202	)/2024				A		2,635	5	A	\$0.0	) 424	,144(1)		D		
Common Stock														78	,980		I	By Grantor Retained Annuity Trust			
Common Stock															130,134(2)		34 <sup>(2)</sup> I		By Grantor Retained Annuity Trust		
		Т	able II -													Owned					
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  (Instr. 3)  3. Transaction Date Execution Date, (Month/Day/Year)  (Month/Day/Year)  3. Transaction Date Execution Date, (if any (Month/Day/Year))				ed Date,	4. Transa Code ( 8)	action	5. Number of		s, options, c  6. Date Exercisa Expiration Date (Month/Day/Yea			ble and	7. Title and Amount of Securities Underlying Derivative 3 (Instr. 3 and		Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	illy D	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e ercisable		opiration ate	Title		Amount or Number of Shares						
Stock Option (right to buy)	\$75.9	05/09/2024			A		4,853		05/	/09/2025	05	5/09/2034		nmon ock	4,853	\$0.00	4,853		D		

## **Explanation of Responses:**

- 1. Balance reflects 169,866 shares transferred from a Grantor Retained Annuity Trust (GRAT) to the Grantor on March 13, 2024. These transfers are exempt from Section 16 pursuant to Rule 16a-13.
- 2. Balance reflects 169,866 shares transferred from a GRAT to the Grantor on March 13, 2024. These transfers are exempt from Section 16 pursuant to Rule 16a-13.

/s/ Eric M. Green, attorney-in-05/13/2024 fact

\*\* 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.