| SEC Form 4 |
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Instruction 1(b).

FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

| OMB Number: | 3235-0287 |
|---------------------|-----------|
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to Section 16. Form 4 or Form 5 obligations may continue. See

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* WEHRWEIN SVEN | | | | | 2. Issuer Name and Ticker or Trading Symbol Proto Labs Inc [PRLB] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|---|--|--|--|----------------------------------|---|--|---------------------------------------|--|----------------------------------|---------------|-----------------------------|--|---|--|-------------------|--|
| WEHK | WEIN 5 | VEN | | 1.00 | | | | J | | | | X Direc | tor | 10% | Owner | |
| (Last) 5540 PIC | | rst) (EEK DRIVE | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 08/30/2022 | | | | | | | Office below | er (give title v) | Othe belo | er (specify w) | |
| | | | | 4. If A | | | | | | | | Individual o ne) | r Joint/Grou | p Filing (Chec | k Applicable | |
| (Street) MAPLE | PLAIN M | N 5 | 5359 | | | | | | | | | | i filed by Mo | e Reporting P re than One F | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | Feisi | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | |
| Date | | | | ransaction e nth/Day/Year) | Execution Date, | | Transaction Dispos Code (Instr. 5) | | 4. Securitie Disposed C 5) | | | | | 6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4) | of Indirect | |
| | | | | | | | Code | v | Amount | (A) or (D) | (A) or Price Transaction(s) | | | | | |
| Common | Stock | | 08 | 8/30/2022 | 2022 A | | | | | Α | \$(|) 1 | 9,142 | 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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/Y | Code (I | Transaction of Code (Instr. Derivative | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Underlying | | | of S | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial | Owners Form: | Beneficial | |

| Security (Instr. 3) | or Exercise Price of Derivative Security | (Month/Day/Year) | if any (Month/Day/Year) | Code (8) | Instr. | Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | | Securities Underlying Derivative Security (Instr. 3 and 4) | | Security (Instr. 5) | Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
|------------------------|---|------------------|----------------------------|--------------|--------|--|-------------------------|--|--------------------|--|--|------------------------|--|--|---------------------------------------|--|
| | | | | Code | v | (A) | A) (D) Date Exercisa | | Expiration Date | Title | Amount or Number of Shares | | | | | |

Explanation of Responses:

1. The deferred stock units vest in full on May 18, 2023, but must be retained by the reporting person until the completion of the reporting person's service on the Board of Directors of Proto Labs, Inc.

| <u>/s/ W. Morgan Burns,</u> <u>Attorney-in-Fact</u> | <u>09/01/2022</u> |
|--|-------------------|
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** 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.