FORM 4

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

Washington, D.C. 20549


OMB APPROVAL OMB Number: 3235-0287 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP 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

Name and Address of Reporting Person*     Schumacher Daniel						2. Issuer Name and Ticker or Trading Symbol Proto Labs Inc [ PRLB ]									eck all app Direc	icable) or	g Per	son(s) to Iss	ner
(Last) 5540 PIONE	(Last) (First) (Middle) 5540 PIONEER CREEK DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 02/13/2024									X Officer (give title below) Other (specific below)  Chief Financial Officer				pecify
(Street) MAPLE PLA	AIN M	N :	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicable a)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				n		
(City)	(State) (Zip)					Rule 10b5-1(c) Transaction Indication													
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Tab	le I - No	n-Deriv	ative	Se	curitie	s Ac	quired	, Dis	posed o	of, o	r Ben	eficial	ly Owne	d			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					ır) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Dispose Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4			5. Amo Securit Benefic Owned Report	ies :ially Following	Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount		(A) or (D)	Price	Transa	ction(s) and 4)			Instr. 4)	
Common Stock				02/13/2024				F		1,018		D	\$33.5	2 1	17,279		D		
Common Stock 02/				02/13	02/13/2024				A		5,221(1)		A	\$ <mark>0</mark>	22,500			D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Security or E (Instr. 3) Price Der	onversion Exercise ice of irivative curity	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transa Code (I B)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expiratic (Month/D	n Date	•	Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)  Amo or Num		Amount or lumber	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	i Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

\$33.52

Employee Stock Option (right to

buy)

1. Restricted Stock Units that vest as follows: 25% of shares subject to the award will vest on February 13, 2025, and on each February 13th thereafter until all shares subject to the award are fully vested.

9,616

(2)

2. 25% of shares subject to the award will vest on February 13, 2025, and on each February 13th thereafter until all shares subject to the award are fully vested.

/s/ W. Morgan Burns, Attorney-in-Fact

Commor

02/13/2034

02/15/2024

9,616

D

\*\* Signature of Reporting Person

9,616

**\$0** 

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).

02/13/2024

\*\* 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.