FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* RHODES HORACE G					2. Issuer Name and Ticker or Trading Symbol LSB INDUSTRIES INC [LXU]										k all applic	able)	g Person(s) to Iss 10% Ov			
(Last) (First) (Middle) 16 SOUTH PENNSYLVANIA AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 03/07/2011										Officer below)	(give title		Other (s below)	pecify	
(Street) OKLAHOMA CITY OK 73107					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Sta	te) (Z	ip)																	
		Table	e I - Non	-Deriva	ative	Sec	uritie	s Acc	quired,	Dis	posed o	f, or Be	neficia	lly	Owned					
			2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.) 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securiti Benefic Owned		es ally Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
										v	Amount	(A) o (D)	r Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock														1,	000		D			
Common Stock														10,000				By Γrust ⁽¹⁾		
Common Stock 0				03/07	/2011				S		500	D	D \$35.19		9 0			I 5	By Spouse's Trust ⁽²⁾	
		Та	ıble II - I								osed of, onvertil				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	n Date,	4. Transactio Code (Inst				6. Date E: Expiration (Month/Da	n Date	•	7. Title al Amount Securitie Underlyi Derivativ (Instr. 3 a	of s ng e Securit	S (I	. Price of Perivative Pecurity Pecurity Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amour or Numbe of Shares	mber						
Nonqualified Stock Option ⁽³⁾	\$7.86								(3)		(3)	Common Stock	5,000			5,000)	D		

Explanation of Responses:

- 1. These shares are held by the reporting person's revocable trust of which the reporting person is the settlor and trustee and possesses a pecuniary interest in the securities held by the Trust.
- 2. These shares are held by the revocable trust of the reporting person's spouse of which the reporting person's spouse is the settlor and co-trustee and possesses a pecuniary interest in the securities held by the
- 3. Nonqualified Stock Option ("NQSO") granted by the Issuer to the reporting person under the Issuer's 2008 Incentive Stock Plan. The NQSO is for a term of ten years from the date of grant, and the exercise price of the NQSO is based on the fair market value of the Issuer's common stock on the date of grant. This NQSO vests at the end of years one through six in the following amounts: 16.5%, 16.5%, 16.5%, 16.5%, 16.5% and 17.5%. This NQSO will be fully vested at the end of year six.

Remarks:

Horace G. Rhodes

03/10/2011

** 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.