FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

	OMB APPROVAL							
	OMB Number:	3235-0287						
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l	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

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1. Name and Address of Reporting Person* GOLSEN SYLVIA H					2. Issuer Name and Ticker or Trading Symbol LSB INDUSTRIES INC [LXU]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner							
(Last) 16 SOUT	(Fi TH PENNS	rst) (YLVANIA AVEI	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/30/2004									Officer (give title Other (specify below) below)							
(Street) OKLAHO CITY (City)	OI		73107 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indivi Line) X	,						
		Tabl	e I - Noi	า-Deriv	ative	Se	curiti	es Ac	quire	d, Dis	posed o	of, o	r Ben	efic	ially (Dwne	ed					
1. Title of Security (Instr. 3)			Date	te onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Cod	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securities Beneficia		ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Cod	e v	Amount		(A) or (D)	Pri	_	Transa	action(s) 3 and 4)			(111501.4)		
Common Stock				01/13	3/2004					V	36,00	0	0 D		\$0	571,290(1)		D				
Common Stock				06/30	0/2004					V	17,45	8	D		\$0	553,832(1)		D				
Common	Stock															28	34,915		I	By Trust ⁽²⁾		
Common	Stock															1,3	394,299		I	By SBL Corp. ⁽³⁾		
		Та									osed of, onvertib					ned						
Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any		4. Transa Code (8)		on of Derivative (Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expira (Month	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	O Fe D oi (I)	D. wnership orm: irect (D) r Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					

Explanation of Responses:

- 1. The amount shown does not include, and Sylvia H. Golsen disclaims beneficial ownership of, the following shares beneficially owned by her spouse, Jack E. Golsen: (a) 197,529 shares owned of record by Mr. Golsen, or his revocable trust, of which Mr. Golsen is trustee, (b) 4,000 shares issuable upon the conversion of a promissory note, (c) 176,500 shares underlying stock options granted to Mr. Golsen, and (d) 133,333 shares issuable upon conversion of 4,000 shares of Series B Preferred Stock.
- 2. The Sylvia H. Golsen 1992 Revocable Trust, of which Sylvia H. Golsen is Trustee.
- 3. SBL Corporation ("SBL") is wholly owned by Sylvia H. Golsen (40% owner), Barry Golsen (son and 20% owner), Steven Golsen (son and 20% owner), and Linda Rappaport (daughter and 20% owner). The number of shares beneficially owned by SBL includes 88,100 shares owned of record by Golsen Petroleum Corporation, the wholly owned subsidiary of SBL.

Jack E. Golsen, Attorney-in-Fact 07/02/2004

** 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.