FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL OMB Number: 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*  GOLSEN STEVEN					2. Issuer Name <b>and</b> Ticker or Trading Symbol  LSB INDUSTRIES INC [ LXU ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
															Direc	ctor	X	10% C	wner	
(Last) (First) (Middle) 16 SOUTH PENNSYLVANIA AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 12/15/2005										Offic belov	er (give title w)		Other below)	(specify	
(Street) OKLAHOMA CITY OK 73107				4. If	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)	(S	tate) (	Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date			Date	Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Code (Instr.					4 and Se Be Ov		. Amount of Securities Beneficially Dwned Following		nership : Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount (A) or (D)		Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Stock											Ì				2	40,165		D	
Common	Stock															Э	60,654		I	As Trustee <sup>(1)</sup>
Common	Common Stock 12		12/15	12/15/2005				P		15,900	0	A	\$4.85		1,415,199			I	By SBL Corp. <sup>(2)</sup>	
Common	Stock			12/15	5/2005				P		200,00	00	A	\$5	.12	1,6	515,199	I By SBL Corp. <sup>(2)</sup>		
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 Derivative Security  3. Transaction Date Execution Date, if any (Month/Day/Year)				ransaction of ode (Instr. Derivative		6. Date E Expiratio (Month/D	n Date	Amount of			Deriv Secu	curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ox Fo Di or (I)	o. wnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nun of	ount nber res						

## **Explanation of Responses:**

- 1. These shares are held of record by two trusts established for the benefit of two of the grandchildren of Jack E. Golsen and Sylvia H. Golsen. Steven J. Golsen is a co-trustee of these trusts.
- 2. These shares are owned of record by SBL Corporation ("SBL"), which is wholly owned by Sylvia Golsen (40% owner), Barry Golsen (20% owner), Steve Golsen (20% owner), and Linda Rappaport (20% owner), Barry Golsen (20% owner), Steve Golsen (20% owner), and Linda Rappaport (20% owner), Steve Golsen (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-

12/19/2005

**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.