FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ngton, D.C. 20549	OMB APPROVAL
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- 11								
	OMB Number:	3235-0287						
	Estimated average burden							
- 1	hours por rosponso:	0.6						

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

1. Name and Address of Reporting Person* GOSS DAVID R						2. Issuer Name and Ticker or Trading Symbol LSB INDUSTRIES INC [LXU]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>GO33 D</u>	AVIDR													X Directo	r		10%	Owner			
(Last) 16 SOUTH	(Firs		3. Date of Earliest Transaction (Month/Day/Year) 10/06/2008									X Officer (give title Other (specify below) Ex VP-Operations/Asst Sec									
(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)	(Sta	ite) (2	Zip)																		
		Tab	le I - N	on-Deriv	ative	Sec	uriti	es Ac	quire	d, Di	sposed of	, or Bei	neficia	lly Owned							
1. Title of Security (Instr. 3) 2. Tran: Date (Month						Execution Da			3. Transa Code (8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)	Price	Transaction (Instr. 3 and				(IIISU. 4)	,		
Common Stock 10/06/2						008			M		35,000	A	\$1.25	170,9	94	D	D				
Common Stock													600		I		As UGMA Custodian ⁽¹⁾				
		Т	able II								posed of, convertib			y Owned							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, Day/Year)	4. Transa Code (8)				6. Date Expira (Mont	ation D		7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)		Derivative Security	9. Nun deriva Securi Benefi Owned Follow Repor Transa (Instr.	tive ities icially d ving ted action(s)	10. Owners Form: Direct (I or Indire (I) (Instr	hip of Be D) Ov ect (In	L. Nature Indirect eneficial wnership nstr. 4)		
						v	/ (A) (D)		Date Exercisable		Expiration Date	Title	Amour or Number of Shares	er							
Nonqualified Stock Option ⁽²⁾	\$1.25	10/06/2008			М			35,000	(2)		07/08/2009	Common Stock	35,00	0 (2)		0 Γ					
Incentive Stock Option ⁽³⁾	\$2.73								(3	3)	11/29/2011	Common Stock	15,00	0	15	5,000	D				
Incentive Stock	\$1.25								(3	3)	07/08/2009	Common Stock	65,00	0	65	5,000	D				

Explanation of Responses:

- 1. These shares are held by Mr. Goss as the custodian of the trusts established for the benefit of his grandchildren.
- 2. Nonqualified Stock Options (?NQSO?) granted by the Issuer to the reporting person. All NQSOs held by the reporting person were currently exercisable. As of the date of this report, the reporting person holds no NQSOs.
- 3. Incentive Stock Options ("ISO") granted by the Issuer to the reporting person. All ISOs the reporting person holds are currently exercisable. As of the date of this report, the total number of shares underlying the ISOs the reporting person holds is 80,000.

<u>David R. Goss</u> <u>10/07/2008</u>

** 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.