## 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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response:	0.5							
	OMB Number: Estimated average burd							

					or Sec	tion 30(r	n) of the I	nvestmer	it Con	npany Act	of 194	U							
1. Name and Address of Reporting Person*				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)							
ROEDEL RICHARD									-	-				X	Direc	ctor	1	0% O	wner
(Last) (First) (Middle) 5 DRAYTON HALL						3. Date of Earliest Transaction (Month/Day/Year) 06/02/2017									Officer (give title below)		Other (spec below)		
					4 If An	nondmor	at Data o	f Original	Eilod	(Month/Do	ov/Voo	r)	16	Individu	ıal o	r loint/Crou	a Eiling (Ch	ock A	nnlicable
(Street)	ON SO	3 2	29910		4. 11 //11	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting					on
(City)	(St	tate) (	Zip)												Pers				g
		Tabl	e I - Noi	n-Deriv	ative S	ecuriti	ies Ac	quired,	Dis	posed o	f, or	Ben	efici	ally O	vne	ed			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispos Code (Instr. 5)		Disposed	curities Acquired (A sed Of (D) (Instr. 3,			4 and Secu Bend Own		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) or (D) Pi		Pric	ູ  Tr	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock			06/02	2/2017			A		6,332	(1)	A	\$0 10,941 D						
Common	Stock												7,100				I		By Profit Sharing Plan
Common	Stock												590 I					By Spouse <sup>(2)</sup>	
		Та								sed of, onvertib					ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ion Date ise (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transacti Code (Ins 8)	on of Der Sec (A) Dis of (Ins	n of I		xercis n Date ay/Ye		Amor Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price Derivat Securit (Instr. 5	ivative curity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
		[								Am	ount	]							

## **Explanation of Responses:**

1. Restricted Stock Units granted pursuant to the LSB Industries, Inc. 2016 Long Term Incentive Plan. Each Restricted Stock Unit represents a right to receive one share of common stock of LXU which, following the June 2, 2017 grant date, shall be nonforfeitable. The Restricted Stock Units will be settled in common stock of LXU within thirty days following the earliest to occur of: (i) the director's separation from service, (ii) the third anniversary of the grant date, and (iii) the occurrence of a change of control.

(D)

Date

Exercisable

Expiration

2. These shares of common stock are owned of record by the reporting person's spouse. The reporting person disclaims beneficial ownership of the shares owned by his spouse.

Richard W. Roedel

Number

of Shares

Title

\*\* Signature of Reporting Person

06/06/2017

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).

Code

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.