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

STATEMENT	OF CHANGES IN	BENEFICIAL	OWNERSHIP

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* SANDERS RICHARD S JR				2. Issuer Name and Ticker or Trading Symbol LSB INDUSTRIES INC [LXU]								Check a	tionship of Reportin all applicable) Director Officer (give title		g Person(s) to Issu 10% Owr Other (sp)wner			
(Last) 16 SOUT	,	rst) (YLVANIA AVEI	Middle) NUE			3. Date of Earliest Transaction (Month/Day/Year) 06/03/2016										belov			below)	
(Street) OKLAHO	OMA O	K 7	73107		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicabl Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				on		
(City)	(St	ate) (.	Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				Ex Day/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Disposed Code (Instr. 5)		ties Acquired (A) I Of (D) (Instr. 3, 4			4 and Se Be		5. Amount of Securities Beneficially Owned Following Reported		vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									v	Amount	() (I	A) or O)	Price	, т	ransa	nsaction(s) tr. 3 and 4)			(111341.4)	
Common Stock			06/03	5/03/2016				A		4,609	(1)	A \$		4,609		4,609		D		
Common Stock															1,250			I	As Trustee ⁽²⁾	
	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 Date (Month/Day/Year) Security 3. Transaction Execution Date Execution Date, if any (Month/Day/Year)				Transaction Code (Instr.		1 of I		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Pric Deriva Securi (Instr.	ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	0 F D 0 (I	0. 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	Amo or Num of Shar	ber						

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 July 1, 2016 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.
- 2. These shares are owned of record jointly by revocable trusts for the benefit of the reporting person and the reporting person and the reporting person and the reporting person and the reporting person are each the trustees of such trusts and jointly possess voting and dispositive power over the shares held by the trusts.

06/07/2016 /s/ Richard S. Sanders, Jr.

** 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.