FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
	OMB Number:	3235-0287				
l	Estimated average burd	en				
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

	nd Address of		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)  Director 10% Owner  Officer (give title Other (specify							
(Last) 16 SOUT	(FI FH PENNS		3. Date of Earliest Transaction (Month/Day/Year) 06/26/2015								X Officer (give title Other (specify below)  VP-Financial Planning								
(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) (State) (Zip)																			
		Tab	le I - Nor	า-Deriv	ative	Sec	curiti	ies Ac	quire	d, Dis	sposed (	of, or Be	enefici	ally C	Owned	l			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		n Dispose	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			5. Amou Securitie Beneficia Owned F Reported	es ally Following	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
										e V	Amount	(A) o	Price	Trompostion(s)				(111311.4)	
Common	5/2015	2015		М		3,57	5 A	\$7.	86	6 18,000				By Trust <sup>(1)</sup>					
		Т	able II - I									, or Ben ible sec			vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transactic Code (Inst		on of		Expirat	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis		Expiration Date	Title	Amoun or Numbe of Shares	1					
Incentive Stock Option <sup>(2)</sup>	\$7.86	06/26/2015			М			3,575	(2)		11/13/2018	Common Stock	0		(2)	0		D	

## **Explanation of Responses:**

1. On June 26, 2015, the reporting person exercised his remaining Incentive Stock Options for 3,575 shares of the Issuer's common stock and immediately transferred these shares of common stock into the reporting person's revocable trust of which he is the settlor and trustee and possesses a pecuniary interest in the securities held by the trust.

2. Incentive Stock Options ("ISO") granted by the Issuer to the reporting person under the Issuer's Incentive Stock Option Plans. An ISO for 15,000 shares of the Issuer's common stock exercisable at \$7.86, with an expiration date of November 13, 2018, was granted to the reporting person on November 13, 2008. This ISO vested at the end of years one through six in the following amounts: 16.5%, 16.5%, 16.5%, 16.5% and 17.5%. This ISO is fully vested. As of the date of this report, the total number of shares underlying the ISO held by the reporting person is 0.

## Remarks:

Michael G. Adams

06/29/2015

\*\* 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.