LSB INDUSTRIES INC

Form 4

November 16, 2007

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

OMB APPROVAL

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005 Estimated average

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Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * BROWN ROBERT C MD (Last) (First) (Middle)			2. Issuer Name and Ticker or Trading Symbol LSB INDUSTRIES INC [LXU]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
			3. Date of Earliest Transaction			
3433 NW 56TH STREET			(Month/Day/Year) 11/14/2007	X Director 10% Owner Officer (give title below) Other (specify below)		
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
OKLAHOMA CITY, OK 73112			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		

			1 010011
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securion(A) or D (Instr. 3,	ispose 4 and (A) or	ed of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	11/14/2007		S	6,500	D	\$ 23	118,016	I	By Trust and Spouse's Trust (1)
Common Stock	11/14/2007		S	2,000	D	\$ 23.21	116,016	I	By Trust and Spouse's Trust (1)
Common Stock	11/14/2007		S	1,481	D	\$ 23.22	114,535	I	By Trust and Spouse's Trust (1)

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Common Stock	11/14/2007	S	2,319	D	\$ 23.24	112,216	I	By Trust and Spouse's Trust (1)
Common Stock	11/14/2007	S	600	D	\$ 23.25	111,616	I	By Trust and Spouse's Trust (1)
Common Stock	11/14/2007	S	800	D	\$ 23.26	110,816	I	By Trust and Spouse's Trust (1)
Common Stock	11/14/2007	S	1,300	D	\$ 23.3	109,516	I	By Trust and Spouse's Trust (1)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title	e and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transac	ctionNumber	Expiration D	ate	Amour	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Underl	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	Derivative	ve		Securit	ties	(Instr. 5)
	Derivative				Securitie	s		(Instr.	3 and 4)	
	Security				Acquired	l				
					(A) or					
					Disposed	i				
					of (D)					
					(Instr. 3,					
					4, and 5)					
									Amount	
									or	
						Date	Expiration		Number	
						Exercisable	Date		of	
				Code	V (Δ) (D)					
				Code	V (A) (D)				Shares	

Reporting Owners

Reporting Owner Name / Address	Relationships							
• 0	Director	10% Owner	Officer	Other				
BROWN ROBERT C MD 3433 NW 56TH STREET	X							

Reporting Owners 2 OKLAHOMA CITY, OK 73112

Signatures

Robert C. Brown, M.D.

**Signature of Reporting Date

Explanation of Responses:

- * 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).
- (1) These shares are held in a joint account owned by the Robert C. Brown Rev. Trust, DTD 08/27/99, of which the reporting person is settlor and trustee and the Zelda F. Brown Rev. Trust, DTD 08/27/99, of which the reporting person's spouse is settlor and trustee.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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