FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPR	OVAL				
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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* Bemis Scott D 2. Date of Event Requiring Stateme (Month/Day/Year) 05/20/2024			3. Issuer Name and Ticker or Trading Symbol LSB INDUSTRIES, INC. [LXU]						
(Last) (First) (Middle) 3503 NW 63RD ST, STE 500			4. Relationship of Reporting Issuer (Check all applicable)	g Person(s) to		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) OKLAHOMA CITY OK (City) (State) (Zip)	_		Director X Officer (give title below) EVP - Manufa	Other below)	(specify	(Ch	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
	Table I - Nor	ı-Derivati	ve Securities Benefic	ially O	wned	<u>'</u>			
1. Title of Security (Instr. 4)						4. Nature of Indirect Beneficial Ownership (Instr. 5)			
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. I)	Form: [(D) or li	Direct ndirect				
Title of Security (Instr. 4) No securities are beneficially owned.			Beneficially Owned (Instr.	Form: [(D) or li	Direct ndirect r. 5)				
No securities are beneficially owned		Derivative	Beneficially Owned (Instr. I)	Form: I (D) or li (I) (Inst	Direct ndirect r. 5)	Own			
No securities are beneficially owned		Derivative ls, warrar cisable and	Seneficially Owned (Instr.) 0 Securities Beneficial	Form: I (D) or li (I) (Insti	Direct ndirect r. 5)) sion cise			

Explanation of Responses:

/s/ Michael J. Foster,

Attorney-in-Fact

** Signature of Reporting Person Date

05/31/2024

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 5 (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.