### Edgar Filing: LILLY ELI & CO - Form 4

LILLY ELI	& CO										
Form 4											
January 30, 2	2015										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB AF	PROVAL			
. •	• • UNITED	<b>STATES</b>					NGE C	OMMISSION	OMB	3235-0287	
Check th	is box		vva	shington,	D.C. 20	549			Number:	January 31,	
if no long		MENT O	F CHAN	IGES IN	RENEEI	CIA		<b>VERSHIP OF</b>	Expires:	2005	
subject to Section 1	5		r Chai		GES IN BENEFICIAL OWNE SECURITIES				Estimated average burden hours per response 0.5		
Form 4 o				SECONTIES							
Form 5	Filed pu	rsuant to	Section 1	6(a) of th	e Securit	ies E	xchange	e Act of 1934,	reepeneem	0.0	
obligatio may cont		(a) of the	Public U	tility Hold	ding Con	ipany	Act of	1935 or Section	ı		
See Instr		30(h)	of the In	vestment	Compan	y Act	t of 194	0			
1(b).											
	<b>D</b> )										
(Print or Type I	(kesponses)										
1. Name and A	Address of Reporting	Person *	2 Issue	r Name and	and Ticker or Trading 5. Re			5. Relationship of	Relationship of Reporting Person(s) to		
Simmons Jeffrey N Symbol			r Name <b>and</b> Ticker or Trading				Issuer				
	·		•	ELI & CO	O [LLY]						
(Last)	(First)	(Middle)		f Earliest Tr				(Check	c all applicable	)	
(2407)	(1 100)	(1.114410)	(Month/E		ansaction			Director	10%	Owner	
				/28/2015				XOfficer (give titleOther (specify below)			
								below) SVP&Pres. I	Elanco Animal	Health	
	(Street)		4 If Ame	endment, Da	ate Original			6. Individual or Jo	int/Group Filin	g(Check	
	(Succe)			nth/Day/Year	-			Applicable Line)	ind Group I him	g(Check	
					,			_X_ Form filed by O			
INDIANAP	OLIS, IN 46285	5						Form filed by M Person	ore than One Rej	porting	
(City)	(State)	(Zip)				~ •			D @ • U		
	<b>`</b>						-	uired, Disposed of		-	
1.Title of Security	2. Transaction Dat (Month/Day/Year)		ned n Date, if	3. Transactic	4. Securit on(A) or Dis			5. Amount of Securities	6. Ownership	7. Nature of Indirect	
(Instr. 3)	(Monul/Day/Teal	any	II Date, II	Code	(Instr. 3, 4)			Beneficially	Form: Direct		
× /		•	Day/Year)	(Instr. 8)			-	Owned	(D) or	Ownership	
								Following Reported	Indirect (I) (Instr. 4)	(Instr. 4)	
						(A)		Transaction(s)	(11150.4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common							\$		_		
Stock	01/28/2015			А	27,653	А	70.97	107,089	D		
Common											
Stock								995	Ι	401(k)	

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

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 control number.

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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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number prof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Unit	<u>(1)</u>	01/28/2015		А	9,843	02/01/2016	02/01/2016	Common Stock	9,843

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Simmons Jeffrey N LILLY CORPORATE CENTER INDIANAPOLIS, IN 46285			SVP&Pres. Elanco Animal Health				
Signatures							
James B. Lootens for Jeffrey N. Simn on file	01/30/2015						
<u>**</u> Signature of Reporting Per		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) Each restricted stock unit represents a contingent right to receive one share of Eli Lilly and Company common stock.

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.