FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL						
OMB Number:	OMB Number: 3235-0104					
Estimated average burden						
hours per response	e: 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

Name and Address of Reporting Person* Pusey Leigh Ann	2. Date of Event Requiring Stateme (Month/Day/Year) 06/12/2017	Statement y/Year) LILLY ELI & CO [LLY]							
(Last) (First) (Middle) LILLY CORPORATE CENTER			Relationship of Reporting Person(s) (Check all applicable) Director 10		n(s) to Issue	(M	5. If Amendment, Date of Original Filed (Month/Day/Year)		
				fficer (give title elow)	Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line)		
(Street)			S	SVP, Corp. Affairs 8	k Comm.		X Form filed by	y One Reporting Person	
INDIANAPOLIS IN 46285							Form filed by Reporting P	y More than One erson	
(City) (State) (Zip)									
Table I - Non-Derivative Securities Beneficially Owned									
1. Title of Security (Instr. 4)				Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable Expiration Date (Month/Day/Year)		te	3. Title and Amount of Secu Underlying Derivative Secu				Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		Expiration Date	Title		Amount or Number of Shares	Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

Remarks:

No securities are beneficially owned.

Bronwen L. Mantlo for Leigh

Ann Pusey, authorization on 06/13/2017

<u>file</u>

** Signature of Reporting Person Date

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

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.

^{*} 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).