Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D.C. 20 | 549 |
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| STATEMENT | OF | CHANGES | IN BEN | IEFICIAL | OWNERS | HIP |
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| | OMB APPROVAL | | | | | | | | | |
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| | OMB Number: 3235-0287 | | | | | | | | | |
| | Estimated average burden | | | | | | | | | |
| ı | hours per response: | 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

| 1. Name and Address of Reporting Person* <u>LILLY ENDOWMENT INC</u> | | | | 2. Issuer Name and Ticker or Trading Symbol ELI LILLY & Co [LLY] | | | | | | | | | | | o of Reportir licable) tor | ng Pe | . , | | | | |
|---|--|--|------------|--|---|--|--------|---|---|--------|-----------------------|---|---------------------------|---|--|---|---|--|-------------------|--|--|
| (Last) (First) (Middle) 2801 NORTH MERIDIAN STREET | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/06/2020 | | | | | | | | | | | Office | er (give title /) | | Other (below) | specify | |
| (Street) INDIANAPOLIS IN 46208-0068 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | S. 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 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea | | | r) Ex | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Tr | | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and | | | | nd 5) Secui Benef | | rities F ficially (I ed Following II | | Ownership m: Direct or irect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | Co | Code V | | Am | ount | (A) or (D) | Pric | ce | | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | | (11150.4) | | |
| Common Stock 04/06/2 | | | 04/06/2020 |) | | | | S | | 15,962 | | D | \$142.7341 ⁽¹⁾ | | 41 ⁽¹⁾ 113,062,619 | | D | | | | |
| | 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) | Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any | | | | 4. Transa Code (8) | | | | Expiration (Month/E) titles red sed 3, 4 | | | e Exercisable and tion Date h/Day/Year) | | | ind of es ing ve (Instr. | 8. Price of Derivative Security (Instr. 5) | | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | e s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code V (A) (I | | | | Date (D) Exercis | | Expiration sable Date | | n Titl | 0 | umber | | | | | | |

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$142.50 to \$143.15, inclusive. The reporting person undertakes to provide to Eli Lilly & Company, any security holder of Eli Lilly & Company, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in footnote (1) to this Form 4.

Remarks:

/s/Diane M. Stenson, Vice President & Treasurer, on behalf of Lilly Endowment

04/07/2020

Inc.

** 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.