## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| <b>STATEMENT</b> | OF CHANGES IN | I BENEFICIAL | <b>OWNERSHIP</b> |
|------------------|---------------|--------------|------------------|

|   | OMB APPROVAL           |           |  |  |  |  |  |  |  |
|---|------------------------|-----------|--|--|--|--|--|--|--|
|   | OMB Number:            | 3235-0287 |  |  |  |  |  |  |  |
| l | Estimated average burd | en        |  |  |  |  |  |  |  |
| l | hours per response:    | 0.5       |  |  |  |  |  |  |  |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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 <b>and</b> Ticker or Trading Symbol LILLY ELI & CO [ LLY ] |        |  |                |   |                    |   |  |   |   | p of Reporting<br>plicable)<br>ctor  | g Perso<br>X  | on(s) to Is                           |                                       |
|---|--|------------------------------------|---------|--|---|---|--------|--|----------------|---|--------------------|---|--|---|---|--|---|---------------------------------------|---------------------------------------|
| (Last) (First) (Middle)<br>2801 NORTH MERIDIAN STREET               |  |                                    |         |  | 3. Date of Earliest Transaction (Month/Day/Year) 10/04/2017 |   |        |  |                |   |                    |   |  |   | Officer (give title below)                          |  | Other below)  | (specify                              |                                       |
| (Street) INDIANAPOLIS IN 46208-0068 (City) (State) (Zip)            |  |                                    | 4. If   | 4. If Amendment, Date of Original Filed (Month/Day/Year) |   |   |        |  |                |   |                    | 6. Indivi<br>Line)<br>X   | ′  |   |   |  |   |                                       |                                       |
|   |  | Tabl                               | e I - N | lon-Deriv  | ative/  | Seci  | uritie | s Ac   | quire          | d, Di   | sposed o           | f, or B   | enefic   | ally (                                  | Owne  | ed   |   |                                       |                                       |
| 1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y   |  |                                    |         | Execution Date,  |   | 3.<br>Transaction<br>Code (Instr. 8)  4. Securities Ac<br>Disposed Of (D) |        | Acquired (A) or<br>(D) (Instr. 3, 4 and  |                | d 5) Secur<br>Benef<br>Owne                                   |                    | cially<br>d Following   | Form:  | nership<br>Direct<br>Indirect<br>tr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |   |                                       |                                       |
|   |  |                                    |         |  |   |   | Code   | v  | Amount         | (A) or<br>(D)   | Price              |   | Reported<br>Transaction(s)<br>(Instr. 3 and 4) |   |   |  | (Instr. 4)  |                                       |                                       |
| Common Stock 10/04/201  |  |                                    | 017     | s 205,000 D \$86.805 <sup>(1)</sup> 123,275,             |   | ,275,804  | ]      | D  |                |   |                    |   |  |   |   |  |   |                                       |                                       |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |                                    |         |  |   |   |        |  |                |   |                    |   |  |   |   |  |   |                                       |                                       |
| Derivative   Conversion   Dat                                       |  | Date Exe<br>(Month/Day/Year) if ar |         |  |   | ransaction<br>code (Instr.  |        | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |                | 6. Date Exercisable an<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |  |   |   | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4) | Ownersh<br>Form:<br>Direct (D)<br>or Indirec<br>(I) (Instr. | nership<br>rm:<br>ect (D)<br>Indirect | Beneficial<br>Ownership<br>(Instr. 4) |
|   |  |                                    |         |  | Code  | v   | (A)    | (D)  | Date<br>Exerci | isable  | Expiration<br>Date | Title   | or<br>Number<br>of<br>Shares                   |   |   |  |   |                                       |                                       |

## 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 \$86.655 to \$87.115, 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

10/05/2017

<u>President & Treasurer, on</u> beh<u>alf of Lilly Endowment Inc.</u>

\*\* 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.