FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549	
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OMB APPROVAL										
OMB Number:	3235-0287									
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0.5

hours per response:

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

Check this box to indicate that a
transaction was made pursuant to a
contract, instruction or written plan
for the purchase or sale of equity
securities of the issuer that is
intended to satisfy the affirmative
defence conditions of Pule 10h5

Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer						
Skovronsky Daniel				ELI LILLY & Co [LIY]								(Che	(Check all applicable) Director 10% Owner								
						2. Date of Fadicat Transaction (Month/Day/Month								_	Officer (give title Other (specify below)						
(Last) (First) (Middle) LILLY CORPORATE CENTER						3. Date of Earliest Transaction (Month/Day/Year) 09/10/2024									EVP, CSO & Pres. LRL & LLY Imm						
LILLY																					
(Street)					4. If A	Amend	ment,	Date of	Origina	l Filed	I (Month/Da	y/Yea	r)	6. Ind Line)	lividual o	r Joint/Grou	p Filing (Ch	eck Ap	oplicable		
INDIANAPOLIS IN 46285														V	Form filed by One Reporting Person						
(City) (State) (Zip)															Form Perso		re than One	Repo	orting		
(=:-,)	(n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	oosed of	, or	Bene	ficial	y Own	ed					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3,			(A) or	A) or 5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Code	v	Amount	(A (D) or)	Price	Transa	ction(s) 3 and 4)			instr. 4)			
Common Stock 09/				09/10/	1/2024				G		111		D	\$ <mark>0</mark>	12	23,627	D				
Common Stock			09/11/2024					G		5,724(1)		D	\$ <mark>0</mark>	117,903		D					
Common	Stock														72	2,359	I		By Trust ⁽²⁾		
Common Stock													3	,257	I		By spouse ⁽²⁾				
		Та									osed of, o				Owne	d					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	Code (I		of		6. Date Expirati (Month/	on Da		7. Title and Amount of Securities Underlying Derivative Security (I 3 and 4)		Di Si (li	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	(D)	11. Nature of Indirec Beneficia Ownershi (Instr. 4)		
						v	(A)	(D)	Date		Expiration Date		Amo or Nun of Sha								

Explanation of Responses:

- 1. Among other gift transactions, the reporting person transferred: (a) 2,359 shares of Eli Lilly and Company common stock to DMGCS Family Holdings LLC, which is a single-member limited liability company held and controlled solely by the reporting person's spouse as trustee of a trust for the benefit of the reporting person's spouse and children; and (b) 3,257 shares of Eli Lilly and Company common stock to the reporting person's spouse
- 2. The reporting person disclaims beneficial ownership of the reported securities except to the extent of his pecuniary interest therein.

Remarks:

/s/ Jonathan Groff for Daniel

Skovronsky, pursuant to

** Signature of Reporting Person

09/12/2024

authorization on file

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.