FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

<b>STATEMENT</b>	<b>OF CHANG</b>	ES IN BEI	NEFICIAL (	OWNERS	HIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
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. Ivanic and Address of Reporting Ferson					2. Issuer Name <b>and</b> Ticker or Trading Symbol ELI LILLY & Co LLY								5. Relationship of Reporting Person(s) to Issue (Check all applicable)					ssuer	
<u>Hedley Mary Lynne</u>						ELI LILLI & CO [ LLI ]							X	Direc	tor		10% O	wner	
(Last)	(Fir	st) (N	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/17/2023										Office	er (give title v)		Other (below)	specify
LILLY C	CORPORAT	E CENTER			4. If A							6. Individual or Joint/Group Filing (Check Applicabl Line)				pplicable			
(Street)													X Form filed by One Reporting Persor			on			
l .	APOLIS IN	<b>J</b> 4	16285										Form Perso	filed by Mo	re tha	ın One Rep	orting		
(City)	(Sta	ate) (Z	Zip)		Rul	Rule 10b5-1(c) Transaction Indication													
											saction was m ons of Rule 10					uction or writt	en pla	ın that is inte	nded to
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day)			Execution Date,		3. 4. Securities Acquired (Disposed Of (D) (Instr. 8)				Securities Beneficially Owned Following		Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership						
									Code	v	Amount	(A) or (D)	Price			ea ction(s) 3 and 4)			(Instr. 4)
Common	Stock	04/17/20				023		A		27(1)	A	\$372	2.35 930		930		D		
Common	Common Stock															98			By Trust <sup>(2)</sup>
	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)	. Title of 2. 3. Transaction Date Execution Date, iccurity or Exercise (Month/Day/Year) if any			5. Number of 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 Securities Underlying Derivative Security (Inst 3 and 4)		ınt		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	l <sub>v</sub>	(A)	(D)	Date Exercis	sable	Expiration Date		of Shares						

## **Explanation of Responses:**

- 1. At the election of the reporting person, the shares acquired pursuant to this filing have been deferred in lieu of cash compensation as stock units under the Lilly Directors' Deferral Plan and will be settled in shares of common stock following the reporting person's separation from service.
- 2. The reporting person disclaims beneficial ownership of the reported securities except to the extent of the reporting person's pecuniary interest therein, and the filing of this report is not an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.

## Remarks:

/s/ Jonathan Groff for Mary
Lynne Hedley, pursuant to the authorization on file

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.