FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden 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* | | | | | | 2. Issuer Name and Ticker or Trading Symbol LILLY ELI & CO [LLY] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---|---------|------|---|-------|---|--|--------------------------------|---|------|--|---|--------------------------------------|--|--|----------------------|---|--|---|
| HOOVER R DAVID | | | | | | | | | | | | | | X | Director | | | 10% C | Owner |
| (Last) | Last) (First) (Middle) LILLY CORPORATE CENTER | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/31/2011 | | | | | | | | | Offic belov | er (give title w) | Other (sp below) | | |
| (Street) INDIANAPOLIS IN 46285 | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ndividual or Joint/Group Filing (Check Applicable X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (St | ate) (2 | Zip) | | | | | | | | | | | | reis | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Exe) if a | Deemed ecution Date, ny onth/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | (A) o (D) | Pric | е | Transaction(s (Instr. 3 and 4 | | | | (111511.4) |
| Common Stock 10/31/2 | | | | | | 011 | | | A | | 224 | A | \$3 | 8.29 | 13,068 | | | D | |
| Common Stock | | | | | | | | | | | | | | | 1,000 | | | I ⁽¹⁾ | Suzanne A. Hoover Revocable Trust |
| 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) | 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date Execution Date, if any (Month/Day/Year) | | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Expirati (Month/ | on Da | | Amoun Securit Underly Derivat | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amoun or Numbe of Shares | | | | | | |

Explanation of Responses:

1. Revocable Trust of which reporting person's spouse is the trustee.

Remarks:

Bronwen Mantlo for R. David Hoover, authorization on file ** Signature of Reporting Person

11/02/2011

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.