#### **GOLDEN CHARLES E**

Form 4 May 02, 2006

## FORM 4

#### **OMB APPROVAL** UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB** Washington, D.C. 20549

3235-0287 Number:

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005

Section 16. Form 4 or Form 5

**SECURITIES** 

Estimated average burden hours per response... 0.5

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * GOLDEN CHARLES E			2. Issuer Name an Symbol	<b>d</b> Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer				
			LILLY ELI & C		(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earliest 7	ransaction	** 5.	107.0			
LILLY CORPORATE CENTER			(Month/Day/Year) 04/28/2006		_X_ Director _X_ Officer (give titl below)				
	(Stuggt)		4.10.4.1.4.1						
	(Street)		4. If Amendment, Γ	Pate Original	6. Individual or Joint	Group Filing(Check			
INDIANAPOLIS, IN 46285			Filed(Month/Day/Ye	ar)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-	Derivative Securities Acc	quired, Disposed of, or	Beneficially Owner			
1.Title of	2. Transaction	Date 2A. Deer	ned 3.	4. Securities Acquired	5. Amount of 6.	7. Nature			

		Tab	16 1 - 14011-1	Jenvanve	Secu	Titles Acq	luii eu, Disposeu	or, or belieffer	iny Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi or(A) or D (Instr. 3,	ispose	ed of (D)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
_			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock	04/28/2006		F	8,035	D	\$ 52.75	85,249	D	
Common Stock							21,392	I (1)	by Golden Associates LP
Common Stock							1,564	I	401(k)

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

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# displays a currently valid OMB control number.

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2.	3. Transaction Date (Month/Day/Year)		4.	5. onNumber	6. Date Exerc		7. Titl		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Tear)	any (Month/Day/Year)	Code (Instr. 8)	of			Under	rlying	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Relationships

## **Reporting Owners**

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other

GOLDEN CHARLES E
LILLY CORPORATE CENTER X Exec. Vice President and CFO
INDIANAPOLIS. IN 46285

## **Signatures**

Bronwen Mantlo for Charles E. Golden, authorization on file 05/02/2006

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

- \* 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).

Held by a family limited partnership of which reporting person and his wife are the sole general partners. Limited partnership interests are

(1) held by other members of reporting person's family. Reporting person disclaims beneficial ownership of Lilly common stock held by

Golden Associates except to the extent of his pecuniary interest therein.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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