

(Print or Type Responses)

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

OMB APPROVAL				
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### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person * Forman Stephen J.	2. Date of Event R Statement (Month)			3. Issuer Name and Ticker or Trading Symbol LIXTE BIOTECHNOLOGY HOLDINGS, INC. [LIXT.OB]				
(Last) (First) (Middle) 248 ROUTE 25A, NO. 2	— 05/13/2016 —		Issuer	4. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  X_Director Officer (give title below)  below)  (Check all applicable)  Officer (specify below)		5. If Amendment, Date Original Filed(Month/Day/Year)  6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person		
(Street) EAST SETAUKET, NY 11733			XDirector Officer (give titl					
(City) (State) (Zip)	Table I - Non-Derivative Securities I				Form filed by More than One Reporting Person  Beneficially Owned			
1.Title of Security (Instr. 4)	Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock	22,500			D				
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  SEC 1473 (7-02  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 control number.  Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
(Instr. 4) an	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	ate Expiration Date	Title Am	nount or Number of ares	Security	(D) or Indirect (I) (Instr. 5)			
Reporting Owners					•			

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Forman Stephen J. 248 ROUTE 25A, NO. 2 EAST SETAUKET, NY 11733	X				

## **Signatures**

/s/ Stephen J. Forman	05/18/2016
**Signature of Reporting Person	Date

# **Explanation of Responses:**

- If the form is filed by more than one reporting person, see Instruction 5(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.

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.