FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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

Check this box to indicate that a

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

contract, instructi purchase or sale issuer that is inte	nade pursuant to a on or written plan for of equity securities of nded to satisfy the se conditions of Rule					
1. Name and Addre		son*	2. Issuer Name and Ticker or Trading Symbol LIXTE BIOTECHNOLOGY HOLDINGS, INC. [LIXT]		tionship of Reporting Perso all applicable) Director	10% Owner
(Last) 680 E. COLOR	(First) ADO BLVD., SI	(Middle) JITE 180	3. Date of Earliest Transaction (Month/Day/Year) 09/30/2024	1	Officer (give title below)	Other (specify below)
(Street) PASADENA (City)	CA (State)	91101 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv X	idual or Joint/Group Filing Form filed by One Repo Form filed by More thar	,
L		Table I - Non	-Derivative Securities Acquired, Disposed of, or Beneficia	lly Ow	ned	

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			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)

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 (Month/Day/Year)	3A. Deemed 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 Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Options to Purchase Common Stock	\$1.3	09/30/2024		A		3,858		09/30/2024	09/30/2029	Common	3,858	\$0 ⁽¹⁾	3,858	D	
Options to Purchase Common Stock	\$2.37							06/30/2024	06/30/2029	Common	10,000		10,000	D	
Options to Purchase Common Stock	\$2.37							06/30/2024	06/30/2029	Common	3,018		3,018	D	
Options to Purchase Common Stock	\$5.88							06/30/2023	06/30/2028	Common	10,000		10,000	D	
Options to Purchase Common Stock	\$7.45							06/30/2022	06/30/2027	Common	10,000		10,000	D	
Options to Purchase Common Stock	\$30.3							06/30/2021	06/30/2026	Common	10,000		10,000	D	
Options to Purchase Common Stock	\$32.1							01/06/2021	01/06/2026	Common	5,000		5,000	D	
Warrants to Purchase Common Stock	\$57							12/07/2018	12/07/2022	Common	2,105		2,105	I	By Stephen Forman Living Trust
Options to Purchase Common Stock	\$9							10/16/2017	10/16/2022	Common	833		833	D	
Options to Purchase Common Stock	\$66							05/22/2019	05/22/2024	Common	833		833	D	
Warrants to Purchase Common Stock	\$60							12/07/2018	12/07/2022	Common	1,667		1,667	I	By Stephen Forman Living Trust

Explanation of Responses:

1. Effective September 30, 2024, the reporting person was granted stock options to purchase an aggregate of 3,858 shares vesting immediately. The grant was in lieu of the quarterly cash compensation due to the reporting person under the Board Compensation Plan.

<u>/s/ Stephen Forman</u> ** Signature of Reporting Person <u>10/28/2024</u> 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.