FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

APPROVAI	

OMB Number:	3235-0104					
Estimated average burden						
hours per response:	0.5					

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* Sawyer Jason David			2. Date of Event Requiring Statement (Month/Day/Year) 07/18/2025	3. Issuer Name and Ticker or Trading Symbol LIXTE BIOTECHNOLOGY HOLDINGS,				INC. [LIXT]	
(Last) (First) (Middle)			4. Relationship of Reporting Person(s) to Issuer (Check all applicable)		to Issuer	5. If Amendment, Date of Original Filed (Month/Day/Year)			
680 E. COLOR	ADO BOULEVARD, SUITE 180			X	Director Officer (give title below)	10% Owner Other (specify below)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) PASADENA	CA	91101					71	Form filed by More than One Reporting Person	
(City)	(State)	(Zip)							

Table I - Non-Derivative Securities Beneficially Owned

·· · · · · · · · · · · · · · · · · ·	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or	4. Nature of Indirect Beneficial Ownership (Instr. 5)
		Indirect (I) (Instr. 5)	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)			3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		Conversion or Exercise	Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	vative (Instr. 5)	

Explanation of Responses:

Remarks:

Any compensation with regard to the appointment of the Reporting Person as a member of the Company's Board of Directors will be determined by the Compensation Committee of the Board.

No securities are beneficially owned.

<u>/s/ Jason Sawyer</u> <u>07/18/2025</u>

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).