FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-028									

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

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

l	OMB Number:	3235-0287
	Estimated average burd	en
	hours per response:	0.5

1. Name and Address of Reporting Person* SANDS ARTHUR T (Last) (First) (Middle) 8800 TECHNOLOGY FOREST PLACE						2. Issuer Name and Ticker or Trading Symbol LEXICON PHARMACEUTICALS, INC./DE [LXRX] 3. Date of Earliest Transaction (Month/Day/Year) 02/23/2011									Relationship of Reporting Person(s) to Issuer Check all applicable) X Director 10% Owner X Officer (give title below) President & CEO					
(Street) THE WOODLANDS TX 77381					4.	If Am	nendment, [Date o	of Original	Filed	l (Month/Da	Line)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(5	State)	(Zip)	n Dori	ivativ	,, S	ocurition	- Ac	quirod	Die	enoeod o	of or B	nofi	cially	Owned					
1. Title of Security (Instr. 3) 2. Transc Date (Month/E			saction	1	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			5. Amount Securities Beneficiall Owned Fo		y	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) o	r Pri	се	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)			
Common	Stock			02/23/2011		1			Α		38,674	1 A		\$ <mark>0</mark>	796,1	,190		D		
Common Stock				02/23/2011		1			F ⁽⁴⁾		10,464	4 D \$		1.81	785,7	785,726		D		
Common Stock														817,5	817,500		I .	By Sands Associates L.P.		
Common Stock													60,000			I (By Spouse As Custodian For Children			
			Table II -								osed of				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	d 4 Date, T	4. Transa Code (I	ction	5. Numbe	er of re es d (A) sed str.	6. Date E Expiratio	5. Date Exercisable and 5. Expiration Date Of Uli			nd Amo ities ng re Secu and 4)	ount	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio	ve es ially ng	10. Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership ect (Instr. 4)	
					Code	v	(A)	(D)	Date Expiration Date Title Amount or Number of Shares			(Instr. 4)								
Stock Option (Right to Buy)	\$1.81	02/23/2011			A		580,000		(1)		02/23/2021	Commor Stock	580	,000	\$0	580,	000	D		
Restricted Stock Units (Phantom	(2)	02/23/2011			A		145,000		(3)		(3)	Commor Stock	145	,000	\$0	145,	000	D		

Explanation of Responses:

Stock)

- 1. Option vests with respect to 25% of the shares subject to the option on the first anniversary of grant (2/23/2012) and vests 1/48th per month for each month of service thereafter.
- 2. Each restricted stock unit represents a contingent right to receive one share of common stock.
- 3. Restricted stock units vest with respect to 25% of the shares subject to the restricted stock units on February 28, 2012 and vest an additional 25% on February 28 of each of the three succeeding years thereafter.
- 4. Withholding of a portion of issued shares by the Company in satisfaction of shareholder's tax withholding obligations with respect thereto.

/s/ Arthur T. Sands, M.D., Ph.D. 02/25/2011

** Signature of Reporting Person 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.