FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL										
	OMB Number:	3235-0287									
-	Estimated average h	nurdon									

0.5

hours per response:

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

1. Name and Address of Reporting Person* <u>Swain Judith L</u>				L	2. Issuer Name and Ticker or Trading Symbol LEXICON PHARMACEUTICALS, INC. [LXRX]								(Che	elationship o eck all applio	cable)	g Pers	son(s) to Iss 10% Ov		
(Last) 8800 TE	(First) (Middle) TECHNOLOGY FOREST PLACE					3. Date of Earliest Transaction (Month/Day/Year) 04/24/2015									Officer below)	(give title		Other (s below)	pecify
(Street) THE TX 77381 WOODLANDS				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line) K Form f	al or Joint/Group Filing orm filed by One Repo orm filed by More than erson		orting Perso	ı	
(City)	(State)	(Zip) ole I - Nor	. Dori	vativ	- So	curities	- Λοα	uired F	Nier	nosed o	of or E	one	ficiall	v Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			saction	action 2A. Deemed Execution Date,		ed Date,	3. Transac Code (Ir	tion	4. Securi Disposed 5)	ties Acq	uired	(A) or	5. Amou Securitie Beneficia	nt of es Forn ally (D) c (I) (II d) tion(s)		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A (D	or	Price			Transact (Instr. 3			
Common Stock 04/24			24/201				A		18,69	1	A	\$0	53,376		D				
			Table II -						ired, Di options						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemee Execution I if any (Month/Day	Date,	4. Transa Code (8)		of		6. Date Exe Expiration Month/Day		7. Title and Ame of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisable		xpiration ate	Title	O N O	lumber					
Stock Option (Right to	\$1.07	04/24/2015			A		20,000		(1)	0.	4/24/2025	Commo		20,000	\$0	20,000)	D	

Explanation of Responses:

 $1. \ Option \ vests \ with \ respect \ to \ 1/12 th \ of \ the \ shares \ subject \ to \ the \ option \ for \ each \ month \ of \ service \ following \ the \ date \ of \ grant.$

/s/ Judith L. Swain

04/24/2015

** 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.