Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APP	OMB APPROVAL								
	OMB Number: 3235-028 Estimated average burden									
	hours per response:	0.5								

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*     McDermott Wendy						2. Issuer Name and Ticker or Trading Symbol  LEXICON PHARMACEUTICALS, INC. [ LXRX ]									Check	all application	able)	g Pers	on(s) to Issi 10% Ov Other (s	wner	
(Last) (First) (Middle) 2445 TECHNOLOGY FOREST BLVD.						3. Date of Earliest Transaction (Month/Day/Year) 02/28/2024									X	below)	P, Humai	n Res	below)	poony	
11TH FLOOR					4. li										6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
(Street) THE WOODLANDS TX 77381					Form filed by More than One Reporting Person																
(City) (State) (Zip)				_   Rι   ∏	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																
		Tab	le I - Nor	n-Deriv	vative	e Se	curit	ies Ac	auire	d. Di	spos	ed o	f. or Be	neficia	ally	Owned					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		1	2A. Deemed Execution Date,		, 3. Tra	3. 4. Sec Transaction Dispos Code (Instr. 5)		Securi	ties Acquir d Of (D) (In	ed (A) or	5. Amou Securitie Benefici Owned F		nt of es ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
				Cod	de V			An	nount	(A) o	Price	•	Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)				
Common Stock				02/2	28/2024				N	1	1	18,94	4 A		)	47,422		D			
Common Stock			02/2	28/2024				N	1	2	27,69	7 A		.)	75,119		D				
Common Stock			02/2	28/2024					2)	2	22,42	5 D \$2.62		.62	52,694		D				
		-	Table II - I										or Ben ble sec			wned					
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	Date,	4. Transaction Code (Instr. 8)				Expira	6. Date Exercisab Expiration Date (Month/Day/Year)			of Securities		D	3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owr Forr Dire or Ir (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	isable	Expira Date	ation	Title	Amour or Number of Shares	r						
Restricted Stock Units	(1)	02/28/2024			M			18,944	(3	3)	(3	)	Common Stock	18,94	4	(1)	18,943	3	D		
Restricted Stock	(1)	02/28/2024		T	M			27,697	(3	3)	(3	)	Common	27,69	<sub>7</sub>	(1)	55,393	3	D		

## **Explanation of Responses:**

- 1. Each restricted stock unit represents a contingent right to receive one share of common stock.
- 2. Withholding of a portion of issued shares by the Company in satisfaction of shareholder's tax withholding obligations with respect thereto.
- 3. Restricted stock units vest with respect to 1/3 of the shares subject to the restricted stock units on February 28 of each of the three years following the year of grant.

/s/ Wendy E. McDermott

02/29/2024

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.