FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIA	L OWNERSHIP

OMB APPROVAL								
OMB Numb	ber: 3235	3235-0287						
Estimated a	Estimated average burden							
hours per re	esponse:	0.5						

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

Name and Address of Reporting Person*     Tessmer James F				<u>  L</u>	2. Issuer Name and Ticker or Trading Symbol LEXICON PHARMACEUTICALS, INC./DE [ LXRX ]								(Che	5. Relationship of Reporting Person(s) to Issuer Check all applicable) Director 10% Owner Officer (give title Other (specif				ner
(Last) (First) (Middle) 8800 TECHNOLOGY FOREST PLACE				3. Date of Earliest Transaction (Month/Day/Year) 02/12/2009									X Office (give time Other (specify below)  VP, Finance & Acctg					
(Street) THE WOODL	ANDS T	x	773811160			4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			te	Execution Date,		Code (Instr. 5)					Form (D) o ollowing (I) (In		n: Direct I r Indirect E nstr. 4) (	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
						Code	v	Amount (A) or (D)		r P	rice	Transacti (Instr. 3 a	ction(s)		[`	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Common Stock 02/12			2/12/20	/2009		A		24,100 A			\$ <mark>0</mark>	25,	25,800		D			
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)		Derivative I		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)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amo or Num of Si			(Instr. 4)			
Employee Stock Option (right to buy)	\$1.45	02/12/2009		A		150,000		(1)	02	2/12/2019	Common Stock	150	,000	\$0	150,00	00	D	

## **Explanation of Responses:**

1. Option vests with respect to 25% of the shares subject to the option on the first anniversary of grant (2/12/2010) and vests 1/48th per month for each month of service thereafter.

## Remarks:

<u>/s/ Tessmer, James F.</u> <u>02/17/2009</u>

\*\* 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.