FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
l	OMB Number:	3235-0287							
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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* Palantoni Frank						2. Issuer Name and Ticker or Trading Symbol LEXICON PHARMACEUTICALS, INC./DE [LXRX]								Relationship eck all applic X Directo	cable) or	g Pers	10% Ov	vner
(Last) (First) (Middle) 8800 TECHNOLOGY FOREST PLACE						Date 0		Trans	saction (Mont	:h/Day/	Year)		Officer below)	(give title		Other (s below)	pecify	
(Street) THE WOODLANDS TX 77381				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								G. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	itate)	(Zip)															
		Tab	le I - Nor	ո-Deriv	vativ	e Se	curities	s Ac	quired, D	ispos	sed o	f, or Be	neficial	ly Owned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date			Code (Ins				Benefici	ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code V	An	mount	(A) or (D)	Price	Transaci (Instr. 3	tion(s)			(Instr. 4)
		-							uired, Dis , options					Owned	,		,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year) i	Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)				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 derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Expir Date	ration	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$1.54	04/30/2010			A		10,000		(1)	04/30	0/2020	Common Stock	10,000	\$0	10,000)	D	

Explanation of Responses:

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

/s/ Frank P. Palantoni

05/03/2010

** 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.