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

Nashington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
0.45.1.										
OMB Number:	3235-0287									
Estimated average burden										
hours per response:	0.5									

	tion 1(b).			Fil	led pur or	suant Secti	to Section on 30(h)	n 16(a of the	a) of the Sec Investment	uritie Com	s Exchan pany Act	ge Act of 1 of 1940	934		Tiours	per res	эропас.	0.5	
1. Name and Address of Reporting Person* BARKER SAM L					2. Issuer Name and Ticker or Trading Symbol LEXICON PHARMACEUTICALS, INC. [LXRX]							[(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) 2445 TE	,	irst) GY FOREST BL		3. Date of Earliest Transaction (Month/Day/Year) 05/13/2024								Officer (give title Other (spe below) below)							
11TH FLOOR					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) THE	ANDS T	X	77381												iled by Moi		n One Repo		
WOODLANDS 1A 7/381						Rule 10b5-1(c) Transaction Indication													
(City)	(S	tate)	(Zip)			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	ı-Deri	vativ	e Se	curities	s Ac	quired, D	isp	osed o	f, or Be	neficial	ly Owned	l				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					action 2A. Deemed Execution Date if any (Month/Day/Year)		` ` 			tr. 3, 4 and	and Securities Beneficially Owned Following Reported		Form (D) o	n: Direct r Indirect sstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	′	Amount	(A) or (D)	Price	Price Transaction(s) (Instr. 3 and 4)						
		-							uired, Dis s, options					Owned					
Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			ransaction of ode (Instr. Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and A of Securities Underlying Derivative Se (Instr. 3 and 4)			ies g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ownership form: Beneficial Direct (D) Ownership or Indirect (Instr. 4)					
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares						
Stock Option (Right to Buy)	\$1.79	05/13/2024			Α		44,906		(1)	05	5/13/2034	Common Stock	44,906	\$0	44,90	6	D		
Restricted			I	- 1			1							1			1	1	

(2)

Explanation of Responses:

Stock Units

- 1. Option vests with respect to one third of the shares subject to the option on each of the first three anniversaries of the grant date.
- 2. Restricted stock unit vests with respect to 100% of the shares subject to the restricted stock unit on the first anniversary of the grant date.
- 3. Each restricted stock unit represents a contingent right to receive one share of common stock.

/s/ Samuel L. Barker

Common

(3)

05/13/2024

36,810

D

** Signature of Reporting Person

36,810

\$<mark>0</mark>

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).

05/13/2024

** 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.