FORM 4

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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OIVID APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours per response:	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

					01 0001	11011 30(11)	or tire	IIIVESIIIEIII I	company	Act	01 1040						
1. Name and Address of Reporting Person* <u>Lapuerta Pablo</u>			L	2. Issuer Name <b>and</b> Ticker or Trading Symbol  LEXICON PHARMACEUTICALS,  INC./DE [ LXRX ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Loot)	(5	'irot)	(Middle)	— [ <u> </u>	IIIODE [ BARK ]								X Officer (give title below)			Other (s below)	pecify
(Last) (First) (Middle) 8800 TECHNOLOGY FOREST PLACE				3. Date of Earliest Transaction (Month/Day/Year) 03/23/2011								SVP, Clin Dev and CMO					
(Street)			4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line)					
WOODLANDS TX 77381			//381									'	X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(5	State)	(Zip)										Person				
		Та	ble I - Non-D	erivati	ve Se	ecurities	s Ac	quired, D	ispose	d o	f, or Be	neficially	y Owned				
		Da	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Yea		e, Transaction Disposed Of Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 a		Beneficia Owned Fe	s Formally (D) (ollowing (I) (I		rm: Direct ) or Indirect	7. Nature of Indirect Beneficial Ownership		
							Code	' Amo	unt (A) or (D)		Price	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)	
			Table II - Der (e.ç					uired, Dis s, options					Owned				
Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any		3A. Deemed Execution Date, if any (Month/Day/Year	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		d	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	Expirati Date	on	Title	Amount or Number of Shares		(Instr. 4)			
Stock Option (Right to Buy)	\$1.72	03/23/2011		A		200,000		(1)	03/23/20	)21	Common Stock	200,000	\$0	200,0	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 (3/23/2012) and vests 1/48th per month for each month of service therafter.

/s/ Pablo Lapuerta, M.D.

\*\* 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.