## Edgar Filing: LEXICON PHARMACEUTICALS, INC./DE - Form 4

LEXICON Form 4 April 27, 20	PHARMACEUT )09	ICALS, II	NC./DE							
FORM	ЛД									PPROVAL
UNITED STATES				SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					N OMB Number:	3235-0287
Check the check						Expires:	January 31, 2005			
subject to Section 16. Form 4 or					UWI	NERSHIP OI	Estimated burden hou	Estimated average burden hours per		
Form 4 orresponse0.5Form 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,5obligationsSection 17(a) of the Public Utility Holding Company Act of 1935 or Section30(h) of the Investment Company Act of 19401(b).1000000000000000000000000000000000000										
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> DEBBANE RAYMOND			2. Issuer Name and Ticker or Trading Symbol LEXICON PHARMACEUTICALS, INC./DE [LXRX]			Issuer	nship of Reporting Person(s) to (Check all applicable)			
(Last) 8800 TECH PLACE	(First) HNOLOGY FOR	(Middle) EST					ve title Other (specify below)			
THE WOODLA	(Street) NDS, TX 77381	1160		endment, Da onth/Day/Year	-	l		6. Individual or Joint/Group Filing(Ch Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reportin Person		
(City)	(State)	(Zip)	Tab	ole I - Non-D	Derivative (	Securities	s Aca	uired, Disposed	of. or Beneficia	llv Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deem Execution any (Month/D	ed Date, if	3. Transaction Code	4. Securiti Acquired ( Disposed ( (Instr. 3, 4	es (A) or of (D)	5. Se B O Fe R Tı (I	Amount of ecurities eneficially wned ollowing eported ransaction(s) nstr. 3 and 4)		7. Nature of Indirect

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

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 control number.

 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. 5. Number of Transactio-Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities8(Instr. 3 and 4)S(1)(1)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 0.99	04/24/2009		А	10,000	<u>(1)</u>	04/24/2019	Common Stock	10,000

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
FB	Director	10% Owner	Officer	Other		
DEBBANE RAYMOND 8800 TECHNOLOGY FOREST PLACE THE WOODLANDS, TX 773811160	Х	Х				
Signatures						

/s/ Debbane, Raymond	04/27/2009			
<u>**</u> Signature of Reporting Person	Date			

## **Explanation of Responses:**

\* 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).

(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.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.