

LEXICON PHARMACEUTICALS, INC.

Form 4

May 02, 2016

FORM 4**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

Check this box
if no longer
subject to
Section 16.
Form 4 or
Form 5
obligations
may continue.
See Instruction
1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF
SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

OMB APPROVAL

OMB
Number: 3235-0287
Expires: January 31,
2005
Estimated average
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(Print or Type Responses)

1. Name and Address of Reporting Person *
LEFKOWITZ ROBERT J MD

2. Issuer Name **and** Ticker or Trading
Symbol

LEXICON PHARMACEUTICALS,
INC. [LXRX]

5. Relationship of Reporting Person(s) to
Issuer

(Check all applicable)

(Last) (First) (Middle)

8800 TECHNOLOGY FOREST
PLACE

(Street)

3. Date of Earliest Transaction
(Month/Day/Year)
04/29/2016

☒ Director ☐ 10% Owner
☐ Officer (give title below) ☐ Other (specify below)

THE WOODLANDS, TX 77381

(City) (State) (Zip)

4. If Amendment, Date Original
Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check
Applicable Line)
☒ Form filed by One Reporting Person
☐ Form filed by More than One Reporting
Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price
Common Stock	04/29/2016		A		1,432	A	\$ 0 9,057

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

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information contained in this form are not
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SEC 1474
(9-02)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)**

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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)	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)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Filing Date of Derivative Security (Instr. 3)
				Code	V	(A)	(D)	
Stock Option (Right to Buy)	\$ 13.96	04/29/2016		A	2,857	(1)	04/29/2026	Common Stock 2,857
Stock Option (Right to Buy)	\$ 26.39					(2)	04/26/2017	Common Stock 1,428
Stock Option (Right to Buy)	\$ 15.4					(2)	04/24/2018	Common Stock 1,428
Stock Option (Right to Buy)	\$ 6.93					(2)	04/24/2019	Common Stock 1,428
Stock Option (Right to Buy)	\$ 13.86					(1)	05/10/2023	Common Stock 2,857
Stock Option (Right to Buy)	\$ 10.78					(1)	04/30/2020	Common Stock 1,428
Stock Option (Right to Buy)	\$ 11.83					(1)	04/29/2021	Common Stock 1,428
Stock Option (Right to Buy)	\$ 11.9					(1)	04/27/2022	Common Stock 2,857
Stock Option	\$ 10.92					(1)	04/25/2024	Common Stock 2,857

(Right to
Buy)

Stock

Option
(Right to
Buy)

\$ 7.49

(1)

04/24/2025

Common
Stock

2,857

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
LEFKOWITZ ROBERT J MD 8800 TECHNOLOGY FOREST PLACE THE WOODLANDS, TX 77381			X	

Signatures

/s/ Robert J.
Lefkowitz

05/02/2016

**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.

(2) 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.

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