FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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

					\neg															
1. Name and Address of Reporting Person* <u>SEGAL ROBERT-MD</u>							2. Issuer Name and Ticker or Trading Symbol DISCOVERY LABORATORIES INC /DE/ [DSCO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
															Director Officer (give title		10% Ow Other (s	·		
(1+)		(Fin-A)										below)	(give title		below)	pecily				
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 06/21/2007								P, Chief I	Medio	al Officer			
2600 KELLY ROAD																				
(Street)							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
WARRINGTON PA 18976														X Form filed by One Reporting Person						
														Form fi	led by Mor	e than	One Repor	ting		
(City) (State) (Zip)													Person							
		Tal	ble I - Non	-Deriv	ativ	e Se	curitie	s Ad	cauired.	Dist	nosed o	f. or Ber	neficial	v Owned						
1. Title of Security (Instr. 3) 2. Transa							2A. Deem		3. 4. Securities Acquired (A)					5. Amou		6. Ownership		7. Nature of		
,, ,					Date (Month/Day/Year)		Execution Date,		e, Transaction Code (Instr.		Disposed Of (D) (Instr. 3, 4			Securitie Beneficia	es ally	Form (D) or	: Direct I Indirect I	Indirect Beneficial		
									ar) 8)							(i) (in:		Ownership (Instr. 4)		
						Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3 a	action(s) . 3 and 4)								
Common	Stock ⁽¹⁾		1/2007		A	V	812	A \$2		1 13,	,005	D								
			Table II - I	Deriva	tive	Sec	urities	Acc	uired, D	ispo	sed of,	or Bene	ficially	Owned		,				
									s, option											
1. Title of	2.		3A. Deemed Execution Da if any						6. Date Exercisable and Expiration Date 7. Title and Amo				Derivative Security			10.	. Beneficial			
Derivative Security	Conversion or Exercise				Transaction Code (Instr. 8)				(Month/Day/Year) Underly Derivat			Underlyin			g	s		Ownership Form:		
(Instr. 3)	Price of Derivative		(Month/Day/	Year) 8								Derivative (Instr. 3 ar				lly	Direct (D) or Indirect	Ownership (Instr. 4)		
	Security											<u> </u> `	•		Following Reported		(I) (Instr. 4)	` ′		
															Transacti (Instr. 4)					
								Ė					Amount	1	. ,					
													or Number							
					ode	v	(A)	(D)	Date Exercisable		Expiration Date	Title	of Shares							
					oue	V	(A)	(0)	Exercisable	e L	Date	Title	Silates							
Incentive Stock												Common								
Option (right to	\$3.27	06/21/2007			A		15,000		06/21/2010	(2)	06/21/2017	Stock	15,000	\$0	15,00	0	D			
buy)			<u></u>									<u> </u>		<u></u>						
Non-																				
Qualified Stock	\$3.27	06/21/2007			A		45,000		06/21/2007	(2)	06/21/2017	Common	45,000	\$0	45,00	_	D			
Option (right to	Ψ3.27	00/21/2007			.1		45,000		00/21/200/		50,21,2017	Stock	45,000	**	45,00	·				

Explanation of Responses:

- $1.\ Transaction\ reported\ on\ Table\ I\ represents\ Issuer's\ matching\ stock\ contribution\ pursuant\ to\ 401(k)\ plan.$
- 2. This employee stock option shall vest 25% on the date of the grant, and the balance shall vest in a series of three successive equal annual installments beginning with the first year anniversary of the grant.

Robert Segal, MD

06/25/2007

** 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.