Instruction 1(b)

FORM 5

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

Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0362								
Estimated average burden									
hours per response:	1.0								

	<u>·</u>	File	ed pursuant to or Section														
	Reporting Person*		$\overline{}$,,,,pa.,,, , ,o	1 01 194	U							
	Name and Address of Reporting Person* Tattory John A				2. Issuer Name and Ticker or Trading Symbol DISCOVERY LABORATORIES INC /DE/						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
					[DSCO]						X	O#i (-i titl-				r (specify	
(Last) (First) (Middle) 2600 KELLY RD				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2010					Year)	VP, Princ Acct Officer							
(Street) WARRINGTON PA 18976				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person							
(City) (State) (Zip)											Form filed by More than One Reporting Person						
	Table	e I - Non-Deriv	ative Sec	uritie	s Ac	quire	d, Dis	sposed (of, or	Benefici	ially C	Owne	d				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		Execution Date, if any		Transaction Code (Instr. 8) Of (D) (Instr. 3, 4 and (A)			or Dispose	Securit Benefic		es ally	Form	rship : Direct	7. Nature of Indirect Beneficial Ownership				
						Amour	nt	(A) or (D)	Price	Is Ye	Issuer's Fiscal		Indirect (I) (Instr. 4)		(Instr. 4)		
tock		12/31/2010			A	A 566 ⁽²⁾ A \$3.18 2,716 ⁽¹⁾				16 ⁽¹⁾		I	By Trust				
tock		09/30/2010			A		57	71 ⁽²⁾	A	\$3.15	.15 2,716 ⁽¹⁾ I				By Trust		
tock											6,667(1)				D		
	Та											ned					
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)	of Deriv Secu Acqu (A) o Dispo of (D) (Insti	ivative (Month/Daurities quired or posed D) str. 3, 4		Expiration Date Month/Day/Year)		Amount of Securities Underlying Derivative Security (Instr. and 4)		Deriv Secu (Instr	vative derivative Securities Beneficial Owned Following Reported		Ownersh Form: Direct (D or Indirect (I) (Instr.		Beneficial Ownership (Instr. 4)	
to to P	ock ock ock ock econversion r Exercise rrice of lerivative	(State) (Zintable (Zintabl	Table I - Non-Deriv rity (Instr. 3) 2. Transaction Date (Month/Day/Year) ock 12/31/2010 ock 09/30/2010 Table II - Derivat (e.g., ptopostory price of learny price of learny large (Month/Day/Year) 3. Transaction Date (Month/Day/Year) in Exercise (Month/Day/Year) graph of the price of learny large (Month/Day/Year)	Table I - Non-Derivative Sec rity (Instr. 3) 2. Transaction Date (Month/Day/Year) ock 12/31/2010 ock 09/30/2010 Table II - Derivative Secur (e.g., puts, calls, Conversion of Exercise (Month/Day/Year) 3. Transaction Date (Month/Day/Year) ock 3. Transaction Date (Month/Day/Year) och Table II - Derivative Secur (e.g., puts, calls, Transaction Code (Instr. 8)	Table I - Non-Derivative Securities rity (Instr. 3) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (e.g., puts, calls, warr 2. Table II - Derivative Securities (e.g., puts, calls, warr 2. 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Number of Date (Month/Day/Year) 4. Transaction (Instr. 4) 6. Ownership Form: Direct (Ownership Form: Direct (O	

Explanation of Responses:

- $1. \ All \ share \ amounts \ are \ adjusted \ to \ reflect \ a \ 1-for-15 \ reverse \ split \ that \ was \ effective \ December \ 28, \ 2010$
- $2.\ Transaction\ reported\ on\ Table\ 1\ represents\ issuer's\ matching\ stock\ contribution\ pursuant\ to\ its\ 401(k)\ plan.$

<u>John A. Tattory</u> <u>12/31/2010</u>

** 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.