FORM 4

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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-02							

December 31. 2014

0.5

## Expires: Estimated average burden hours per

## 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

of Section So(n) of the investment Company Act of 1540												respo	nse:					
Name and Address of Reporting Person*     COOPER JOHN G					<u>D</u>	2. Issuer Name and Ticker or Trading Symbol DISCOVERY LABORATORIES INC /DE/ [ DSCO ]						E/ (Ch	eck all appli Directo	cable)	10% Ov		ner	
(Last)	.ast) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 12/13/2002							Sr.VP, CFO				
(Street)					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line)					
(City)	City) (State) (Zip)												X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
		Tab	le I - Non	-Deriv	/ative	e Sec	curities	s Ac	quired, Di	sposed	of, or Be	neficiall	y Owned	l				
1. Title of Security (Instr. 3)  2. Transa- Date (Month/Date)						Execution Date,			Code (Ins					es ally Following	Form (D) o	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V				Amount	(A) oi (D)	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)					
		Ī							uired, Dis , options,				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Date,	Code (Inst				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Non- Qualified Stock Option (Right to	2.75	12/13/2002			A		80,000		07/15/2003	12/13/2012	Common Stock	80,000	\$0	80,00	0	D		

## **Explanation of Responses:**

1. All such options shall vest in their entirety upon the fourth anniversary of the date of grant or at such earlier time, if ever, upon the receipt by the Company of a New Drug Application (NDA) approval by the United States Food and Drug Administration for Surfaxin for either Respiratory Distress Syndrome in premature infants, Meconium Aspiration Syndrome in full-term infants, or Acute Respiratory Distress Syndrome in adults.

/s/ John Cooper

07/16/2003

\*\* 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.