## FORM 4

#### Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue. See

Instruction 1(b).

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							

hours per response...

0.5

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Responses	s)															
1. Name and Address of Reporting Person * Spissinger Allan Horst				2. Issuer Name and Ticker or Trading Symbol Lexaria Bioscience Corp. [LXRP]								5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
8131 198	st) BA STREE	(First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/23/2020								X Officer (give title below) Other (specify below)  Chief Financial Officer				
(Street) LANGLEY, A1 V2Y 1Y6				4. If Amendment, Date Original Filed(Month/Day/Year)							Year)		6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(Cit	y)	(State)	(Zip)		Table I - Non-Derivative Securities Acqu						s Acquire	ired, Disposed of, or Beneficially Owned					
(Instr. 3) Da		2. Transaction Date (Month/Day/Yes	Exe (Year) any		2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		f (D) O		(-)		Ownership Form:	7. Nature of Indirect Beneficial Ownership	
							С	ode	V A	mount	(A) or (D)	Price		(	I) Instr. 4)	(msu. 1)	
common shares										11	19,116		D	)			
			Table I			e Securiti		ii a quired	n this for a currer	orm a itly va	re not re llid OMB or Benef	quired t control icially O	collection of o respond u number. wned				1474 (9-02)
	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year) Execution any (Month		4. Transaction Code (Instr. 8)		5. Number of		Expiration Date (Month/Day/Ye		cisable ate		T	es	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Owners Form of Derivati Security Direct ( or Indire	Ownersh (Instr. 4)
				Code	v	(A)	(D)	Date Exer	e rcisable	Exp	iration	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4	)
stock options	\$ 0.32	04/23/2020		A		650,000	)	04/2	23/2020	04/	23/2025	comm	1650.000	\$ 0	650,000	D	

## **Reporting Owners**

D C O N	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Spissinger Allan Horst 8131 198A STREET LANGLEY, A1 V2Y 1Y6			Chief Financial Officer					

## **Signatures**

/Allan Spissinger/	04/23/2020
**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).

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.