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	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 0.5 hours per response:

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

1. Name and Address of Reporting Person* FREEMAN KEVIN D				<u> </u>	2. Issuer Name and Ticker or Trading Symbol GALECTIN THERAPEUTICS INC GALT.OB						(Che	5. Relationship of Reportir (Check all applicable) X Director			10% Owner		
(Last) (First) (Middle) C/O GALECTIN THERAPUTICS INC. 7 WELLS AVENUE, SUITE 34				0	3. Date of Earliest Transaction (Month/Day/Year) 06/02/2011 4. If Amendment, Date of Original Filed (Month/Day/Year)						6 In	Officer (below)		Filing	Other (sp below)		
(Street) NEWTO (City)		(A tate)	02459 (Zip)		06/06/2		Jale 0	ii Original Fii	ей (МОІ	ширау	// rear)	Line)	C Form file	ed by One	Repor	ting Person One Reporti	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				ite	Execution Dat		Date,	e, Transaction Disposed Of Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amount Securities Beneficial Owned Fo Reported	Forn lly (D) o ollowing (I) (Ir		Direct Indirect Etr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	Am	mount (A) or (D)		Price	Transactio	on(s)		"	1130. 4)
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. r) 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)		and	7. Title and Amount of Securities Underlying Derivativ Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expira Date	ation	Title	Amount or Number of Shares		(Instr. 4)			
Employee Stock Option (right to	\$1.35 ⁽²⁾	06/02/2011		A		88.888 ⁽²⁾		(1)	06/02	2/2021	Common Stock	88,888(2)	\$0	88,888	3 ⁽²⁾	D	

Explanation of Responses:

- $1. \ The \ option \ vests \ quarterly \ in \ eight \ equal \ installments \ beginning \ September \ 2, \ 2011.$
- 2. This amended Form 4 corrects the exercise price (increase) and the number of shares (decrease) subject to the option so as to be consistent with the terms of the grant.

/s/ Maureen E. Foley, Attorneyin-Fact for Kevin D. Freeman

07/19/2011

** Signature of Reporting Person

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.