FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject	STATEM
to Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	F

ENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* <u>LEWIS JOEL</u>					2. Issuer Name and Ticker or Trading Symbol GALECTIN THERAPEUTICS INC GALT										Relationship of Reporting Person(s) to Issu (Check all applicable) X Director 10% Own				
(Last)	`	,	Middle)				- 1: .				15. 14. 1				X Officion below	,	t and	Other (s below)	specify
C/O GALECTIN THERAPEUTICS INC. 4960 PEACHTREE INDUSTRIAL BLVD., STE 240					Date of Earliest Transaction (Month/Day/Year) 01/14/2022 4. If Amendment, Date of Original Filed (Month/Day/Year)								6	President and CEO 6. Individual or Joint/Group Filing (Check Applicable					
(Street) NORCR	OSS G.	A 3	0071		4. 11 #	amenu	ment,	Date of	i Ongina	u Filed	з (монтида	цу теа	ar)	Lir	ne) <mark>X</mark> Forn	n filed by On n filed by Mo	e Rep	orting Perso	on
(City)	(S	tate) (2	Zip)																
		Table	I - Non	-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or	Ben	efici	ally Owr	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Exec ay/Year) if an		Deemed ecution Date, ny onth/Day/Year)				es Acquired (A Of (D) (Instr. 3,			nd Securi Benef	icially d Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										v	Amount	(A (D	A) or D)	Price	Transa	Transaction(s) (Instr. 3 and 4)			(1130.4)
Common Stock ⁽¹⁾ 01/14/3					/2022				A		8,251		A	\$2.0	02 307,868 ⁽²⁾			D	
	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)	erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. 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)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		f g Instr.	8. Price of Derivative Security (Instr. 5)		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	Code V (A) (D)		(D)	Date Exercis			Title	or Nui of	mber					

Explanation of Responses:

1. Mr. Lewis and Galectin Therapeutics Inc. entered into an employment agreement, dated August 31, 2020, and a Deferred Stock Unit Agreement, dated August 31, 2020. Pursuant to these agreements, 80% of Mr. Lewis' compensation will be paid in the form of deferred stock units ("DSUs") in accordance with the terms and subject to the provisions set forth in the Deferred Stock Unit Agreement. The shares of Common Stock being reported herein underly DSUs issued to Mr. Lewis pursuant to the agreements, at a price per share equal to the closing price of the Common Stock on date of the transaction. The DSUs shall be settled in shares of Common Stock as follows: (i) twenty five percent shall be settled on March 1, 2023, (ii) twenty five percent shall be settled on September 1, 2023 and (iii) fifty percent shall be settled on March 1, 2024.

2. Represents shares underlying DSUs and Common Stock

Jack W. Callicutt, by power of 01/18/2022

** 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.