SEC Form 4 FORM 4	UNITE	D STATE	ES S					GE C	OMMIS	SSION					
			Washing	lon, D.C	. 2054	49			OMB APPROVAL						
Check this box if no longer s to Section 16. Form 4 or For obligations may continue. Se Instruction 1(b).	Filed p	ursuar	t to Section 16(a) of the In	of the S	ecuriti	es Exchange			Estimated average burden		3235-0287 den 0.5				
1. Name and Address of Repo		2. Issuer Name and Ticker or Trading Symbol <u>GALECTIN THERAPEUTICS INC</u> [GALT]							ationship of Re k all applicable) Director Officer (give	10% Owner		Dwner			
(Last) (First) C/O GALECTIN THER			e of Earliest Transa 5/2023	action (N	/onth/	'Day/Year)		X Oncer (give due Other (specify below) below) President and CEO							
4960 PEACHTREE INDUSTRIAL BLVD., STE 240			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					
(Street) NORCROSS GA 30071									Form filed by More than One Reporting Person						
(City) (State)	(Zip)			e 10b5-1(c) heck this box to indic atisfy the affirmative of	ate that a	a trans	action was mac	de pursua	int to a contr	act, instruction o n 10.	r writte	en plan that is inte	ended to		
	Table I - No	n-Derivati	ve S	ecurities Acq	uired,	Dis	posed of,	or Bei	neficially	/ Owned					
1. Title of Security (Instr. 3)		2. Transactic Date (Month/Day/		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Follow Reported	/ing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			(1150.4)		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

A

10,947

			(0.9.) P	,			,	•••••••			••••••	7			
1. Title of Derivative Security (Instr. 3)	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)		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 (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

Common Stock⁽¹⁾

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, amended on July 25, 2022. 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 and e 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, 2024.

2. Represents shares underlying DSUs and Common Stock.

Jack W. Callicutt, by power of 09/18/2023

<u>attorney</u>

** Signature of Reporting Person Date

\$1.76

Α

969,405(2)

D

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).

09/15/2023

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.