FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Rubin Marc</u>				2. Issuer Name and Ticker or Trading Symbol GALECTIN THERAPEUTICS INC						LT Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) C/O GAI	`	(First) (Middle) CTIN THERAPEUTICS INC.					3. Date of Earliest Transaction (Month/Day/Year) 01/24/2024							(give title	Other (s below)	pecify
4960 PEACHTREE INDUSTRIAL BLVD., STE 240			4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	OSS G	A	30071											led by One Re led by More th	-	- 1
(City)	(S	tate)	(Zip)		- R	Rule 10b5-1(c) Transaction Indication										
						Chec	k this box y the affirr	to indi native	cate that a tra defense cond	nsaction was itions of Rule	made pursua 10b5-1(c). S	int to a conti ee Instructio	act, instructio n 10.	n or written plar	that is intended	to
		Tab	le I - Non	-Deriv	vativ	e Se	curities	s Ac	quired, D	isposed	of, or Be	neficiall	y Owned			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		Code (Instr. 5)				es Form ally (D) of Following (I) (II	m: Direct or Indirect Enstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	Amount	(A) o	r Price	Reported Transact (Instr. 3 a	ion(s)		(Instr. 4)	
		٦	Fable II - [uired, Dis				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 Date, if any (Month/Day/Year	ate,	4. Transaction Code (Instr.		n of E		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				
Stock Option (right to buy) ⁽¹⁾	\$1.72	01/24/2024			A		50,000		(2)	01/24/2034	Common Stock	50,000	\$0	50,000	D	

Explanation of Responses:

- 1. The stock options were issued pursuant to the Galectin Therapeutics, Inc. 2019 Omnibus Equity Incentive Plan.
- 2. The options vest 100% on December 31, 2024.

Jack W. Callicutt, by power of <u>attorney</u>

02/07/2024

** 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.