SEC For	m 4 <b>FORM</b> -	4 UI	NITEI	D STAT	ES S	SECI		S AN	DE	XCHAN	GE C	OMI	NISSIO	N		
							Washing	ton, D.C	205	49					OMB APPR	)VAL
bligat	this box if no lo tion 16. Form 4 ions may contin tion 1(b).	or Form 5	STA		pursua	nt to Se	ection 16(a)	of the S	ecuriti	NEFICIA es Exchange npany Act of	Act of 19		RSHIP	Estim	Number: nated average bur per response:	3235-0287 den 0.5
1. Name and Address of Reporting Person <sup>*</sup>					2. Issuer Name and Ticker or Trading Symbol <u>GALECTIN THERAPEUTICS INC</u> [ <u>GALT</u> ]								S. Relationship of Reporting Person(s) to Issuer   Check all applicable)   X Director   00 Offsag (size (siz			
(Last)	(Fir	rst) (N	viddle)										X Office below	er (give title v)	Other below	(specify )
C/O GALECTIN THERAPEUTICS INC. 4960 PEACHTREE INDUSTRIAL BLVD., STE 240						3. Date of Earliest Transaction (Month/Day/Year) 01/13/2023							President and CEO			
						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)			
(Street) NORCROSS GA 30071													X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State) (Zip)																
		Table	I - No	n-Deriva	tive S	ecuri	ities Acq	uired,	Dis	posed of,	or Ber	nefici	ally Own	ed		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					(Year) If an		eemed ıtion Date, h/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			nd Securi Benefi	ties cially I Following	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(			(1150. 4)
Common Stock <sup>(1)</sup> 01/13/2					2023			A		15,351	Α	\$1.	14 714	<b>1</b> ,218 <sup>(2)</sup>	D	
		Tal								osed of, o onvertible				d		
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Executi ty or Exercise (Month/Day/Year) if any		med 4. Transac Code (Ir Day/Year) 8)		ction Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expiration Date			Amount of Deri Securities Sec		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	

## 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, 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 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, 2028 and (iii) fifty percent shall be settled on March 1, 2024.

Date

Exercisable

2. Represents shares underlying DSUs and Common Stock.

Jack W. Callicutt, by power of 01/17/2023

attorney

Expiration Date

\*\* Signature of Reporting Person Date

Amount or Number

Shares

of

Title

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).

Code

(A) (D)

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.