FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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	OMB Number:	3235-0287					
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l	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

						2. Issuer Name and Ticker or Trading Symbol GALECTIN THERAPEUTICS INC GALT								5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director X 10% Own					
					3. Date of Earliest Transaction (Month/Day/Year) 04/19/2016									Officer (give title Other (spe below) below)					
(Street) ATLANTA, GA 30309 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year) 04/21/2016									Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person					
		Tabl	e I - N	on-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or I	3enefi	cially	Own	ed .			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye						Execution Date			3. Transa Code (8)			s Acquired (A) or of (D) (Instr. 3, 4 a			Secur	icially d Following	Form (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) o (D)	Price		Trans	action(s) 3 and 4)			(111501.4)
Common Stock 04/19/2016									S		33,100	D	\$1.6	802(1)	3,2	,271,909(3)		D	
Common	Stock			04/20/2	2016				S		11,212	D	\$1.5	573(2)	3,2	60,697(3)		D	
		Та	ible II								osed of, convertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code (8)				6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Der Sec (Ins	rice of ivative curity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4		Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amoun or Numbe of Shares						
1. Name and Address of Reporting Person* 10X Fund, L.P.																			

1. Name and Address of Reporting Person* 10X Fund, L.P.								
(Last)	(First)	(Middle)						
1230 PEACHTREE STREET, N.E., SUITE 2445								
(Street)								
ATLANTA,	GA	30309						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* 10X Capital Management, LLC								
(Last)	(First)	(Middle)						
1230 PEACHTREE STREET, N.E., SUITE 2445								
(Street)								
ATLANTA,	GA	30309						
(City)	(State)	(Zip)						

- 1. Reflects weighted average price. Range of gross prices were between \$1.69 and \$1.715. The reporting person will provide upon request by the Commission staff, the issuer, or a security holder of the issuer, full information regarding the number of shares purchased or sold at each separate price. This Form 4/A amends the original filing to show the net sales price after deduction of commissions charged by the selling broker.
- 2. Reflects weighted average price. Range of gross prices were between \$1.55 and \$1.62. The reporting person will provide upon request by the Commission staff, the issuer, or a security holder of the issuer, full information regarding the number of shares purchased or sold at each separate price. This Form 4/A amends the original filing to show the net sales price after deduction of commissions charged by the
- 3. 10X Fund, L.P. has direct beneficial ownership of all the securities owned by 10X Fund, L.P. 10X Capital Management, LLC, a Florida limited liability company, is the general partner of 10X Fund, L.P., a Delaware limited partnership, and may be deemed to have indirect beneficial ownership of all or a portion of the securities owned directly by 10X Fund, L.P. 10X Capital Management, LLC disclaims beneficial ownership of the reported securities except to the extent of its pecuniary interest therein.

/s/ James C. Czirr, as

Managing Member of the
General Partner for 10X Fund,
LP
/s/ James C. Czirr, as
Managing Member of 10X

11/18/2016

Date

<u>Capital Management, LLC</u>
** 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.