FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burden									
ı	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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* SHULMAN STEPHEN						2. Issuer Name <b>and</b> Ticker or Trading Symbol GALECTIN THERAPEUTICS INC GALT								5. Relationship of Reporting Person(s) to Iss (Check all applicable) X Director 10% Ov			ner	
(Last) (First) (Middle) C/O GALECTIN THERAPEUTICS, INC. 4960 PEACHTREE INDUSTRIAL BLVD., STE 240					01/	3. Date of Earliest Transaction (Month/Day/Year) 01/16/2019									r (give title	Filing	Other (s below)	
			30071 (Zip)		, 4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	e) X Form Form	·			
		Tab	le I - Nor	n-Deriv	ative	e Se	curities	s Ac	quired, D	ispo	osed o	f, or Be	neficial	ly Owned				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						ction 2A. Deemed Execution Date,			3. 4. Securities Ac Transaction Disposed Of (D) Code (Instr. 5)					Benefic Owned	nt of es ally Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									Code V	,	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
		-							uired, Dis , options					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 I if any (Month/Day	Date, T	Code (In				6. Date Exercis Expiration Date (Month/Day/Ye		of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e O S F Illy D O (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V	v	(A)	(D)	Date Exercisable		xpiration vate	Title	Amount or Number of Shares					
Stock option (right to buy)	\$4.72	01/16/2019			A		25,000		(1)	01/	/16/2029	Common stock	25,000	\$0	25,000	)	D	

## Explanation of Responses:

1. The options vest 100% on January 16, 2020.

## Remarks:

/s/ Jack W. Callicutt, by power of attorney

01/18/2019

\*\* 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.