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									
- 1	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* FREEMAN KEVIN D					2. Issuer Name and Ticker or Trading Symbol GALECTIN THERAPEUTICS INC								Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Owner					
(Last) C/O GAI	`	irst) HERAPEUTICS	(Middle) INC.			3. Date of Earliest Transaction (Month/Day/Year) 01/24/2024								Officer below)	(give title	Other (below)	specify	
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 More	Reporting Persorthan One Repo		
(City) (State) (Zip)				R	Rule 10b5-1(c) Transaction Indication													
Che sati							Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								d to			
		Tab	le I - Non	-Deriv	ativ	e Se	curities	s Ac	quired, D	Disp	osed o	f, or Be	neficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execu		Date,	Transaction Disposed Of Code (Instr. 5)		ties Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amour Securitie Beneficia Owned F	s Forn	6. Ownership Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount (A) or (D)		Price	Reported Transact (Instr. 3 a	ion(s)		Instr. 4)		
		1	Fable II - E						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, 1	4. Transaction Code (Instr. 8)				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)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		opiration	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.