FORM 4

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

Washington, D.C. 20549

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

OMB APPROVAL

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Rubin Marc						2. Issuer Name and Ticker or Trading Symbol GALECTIN THERAPEUTICS INC GALT								5. Relationship of Reporting Perso Check all applicable) X Director			son(s) to Iss	
(Last)	(F	irst)	(Middle)		Ĺ	_								Office below	r (give title		Other ( below)	specify
C/O GALECTIN THERAPEUTICS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 12/15/2016												
4960 PEACHTREE INDUSTRIAL BLVD., STE 240														ta di dale al an	1-:	:::	(Ob l - A	-lili-
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)				
NORCROSS GA 30071													Form	Form filed by More than One Reporting				
(City)	(S	tate)	(Zip)			Person								"				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (I	Transaction Disposed Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4		Benefic	es ially Following	s Forn ally (D) o ollowing (I) (Ir		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) o (D)	Price	Transac (Instr. 3	tion(s)			(Instr. 4)
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
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	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. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	e s llly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		expiration Date	Title	Amount or Number of Shares					
Stock option (right to buy)	\$0.89	12/15/2016			A		51,500		(1)	1	2/15/2026	Common stock	51,500	\$0	51,50	0	D	

## Explanation of Responses:

1. The options vest 100% on the date of Galectin Therapeutics, Inc.'s 2017 Annual Stockholders Meeting.

## Remarks:

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

\*\* Signature of Reporting Person Date

12/19/2016

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.