FORM 4

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

Washington, D.C. 20549	OMB APPR	OVAL		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028		
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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*  LEWIS JOEL					2. Issuer Name and Ticker or Trading Symbol GALECTIN THERAPEUTICS INC GALT									5. Relationship of Reporti (Check all applicable)  X Director  Officer (give title			ng Pers	10% Ov	vner
(Last)	(Fi	rst) (N	/liddle)											X	below			Other (s below)	sресіту <u> </u>
C/O GALECTIN THERAPEUTICS INC. 4960 PEACHTREE INDUSTRIAL BLVD., STE 240				3. Date of Earliest Transaction (Month/Day/Year) 07/29/2022									President and CEO						
240					4. If Amendment, Date of Original Filed (Month/Day/Year) 08/01/2022									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NORCR	OSS G	A 3	0071		08/0	1/202	.2							X		filed by On filed by Mo		Ü	
(City)	(St	ate) (Z	Zip)																
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	or Be	enefic	ially	/ Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution D			Date,	Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			4 and Securit		ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D) Pr		е	Transa				(Instr. 4)
Common Stock <sup>(1)</sup> 07/29/2					2022				A		7,743(3)	A	\$2	.26 552		2,139(2)		D	
	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)	/e Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		ion Date,	4. Transaction Code (Instr. 8)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Date Precisable Date			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)  Amoun or Numbe of Title Shares		int eer		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y C	0. Ownership Form: Oirnect (D) Or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (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. 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, 2023 and (iii) fifty percent shall be settled on March 1, 2024.

- 2. Represents shares underlying DSUs and Common Stock
- 3. This Form 4A is filed to correct the number of shares acquired.

Jack W. Callicutt, by power of 08/01/2022 attorney

\*\* 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.