FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours ner resnonse	. 0.5						

Transaction(s)

Price

1. Title of Security	(Instr. 3)		2. Transact Date (Month/Day		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)	, 4 and	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
(City)	(State)	(Zip)		 	heck this box to indica	ate that a transa	ion Indication action was made pursuant to ns of Rule 10b5-1(c). See In			en plan that is inte	ended to
240 (Street) NORCROSS	GA	30071	, SIE	4. IT Ar	mendment, Date of	Originai Filed	(Month/Day/Year)	6. Indiv Line) X	ridual or Joint/Group Form filed by One Form filed by Mor Person	e Reporting Pers	son
1. Name and Address of Reporting Person* LEWIS JOEL (Last) (First) (Middle) C/O GALECTIN THERAPEUTICS INC. 4960 PEACHTREE INDUSTRIAL BLVD., STE			2. Issuer Name and Ticker or Trading Symbol GALECTIN THERAPEUTICS INC [GALT] 3. Date of Earliest Transaction (Month/Day/Year) 12/15/2023			(Check X X	X Officer (give title Other (specify below) President and CEO				
Instruction 1(b).			Filed		nt to Section 16(a) oction 30(h) of the Inv		es Exchange Act of 1934 npany Act of 1940	ļ	llouis	рег гезропас.	0.5

(A) or (D) (Instr. 3 and 4) Common Stock(1) 12/15/2023 1,030,694(2) 12,042 \$1.6 D A A Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of 3. Transaction 3A. Deemed Execution Date, 5. Number 6. Date Exercisable and 7. Title and 8. Price of 9. Number of 10. 11. Nature Conversion Derivative Transaction **Expiration Date** Amount of Derivative derivative Ownership of Indirect (Month/Day/Year) Derivative Securities Security or Exercise if any Code (Instr. (Month/Day/Year) Security Securities Form: **Beneficial** Underlying Derivative Price of Derivative (Month/Day/Year) Securities Acquired (Instr. 5) Beneficially Direct (D) Ownership (Instr. 4) or Indirect (I) (Instr. 4) Owned (A) or Disposed of (D) (Instr. 3, 4 Security Security (Instr. 3 and 4) Following Reported Transaction(s) (Instr. 4) and 5) Amount or Number Expiration (A) (D) Title Code Exercisable Date **Shares**

Code v Amount

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, amended on July 25, 2022. 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, 2028 and (iii) fifty percent shall be settled on March 1, 2024.

2. Represents shares underlying DSUs and Common Stock

Jack W. Callicutt, by power of 12/18/2023 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.