SEC Form 4 FORM 4 UNI		ES S	SECURITIES	-			GE C	OMMI	SSION			
	Washington, D.C. 20549							OMB A		OVAL		
to Section 16. Form 4 or Form 5 obligations may continue. See			Pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940						Estimated average burden		3235-0287 rden 0.5	
1. Name and Address of Reporting Person [*] <u>LEWIS JOEL</u>		2. Issuer Name and Ticker or Trading Symbol <u>GALECTIN THERAPEUTICS INC</u> [GALT]						(Chec	5. Relationship of Reporting Person(s) to (Check all applicable) X Director 10% X Officer (give title Othe			
(Last) (First) (Middle) C/O GALECTIN THERAPEUTICS INC.			3. Date of Earliest Transaction (Month/Day/Year) 04/14/2023						A below) below) President and CEO			
4960 PEACHTREE INDUSTRIAL BLVD., STE 240			4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person			
Street) NORCROSS GA 30071									Form filed by More than One Reporting Person			
(City) (State) (Zip)	(State) (Zip)		Rule 10b5-1(c) Transaction Indication 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.									
Table I -	Non-Deriva	tive S	ecurities Acq	uired,	Dis	posed of,	or Ber	neficially	y Owned			
Da		ction ay/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of 5)	Acquire (D) (Inst	d (A) or r. 3, 4 and	5. Amount of Securities Beneficially Owned Follow Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock ⁽¹⁾ 04/14/2		2023		Α		9,585	A	\$2.01	849,199(2	2) D		
Table			curities Acqui IIs, warrants,						Owned			

Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 Direct (D) or Indirect (I) (Instr. 4) Security Security (Instr. 3 and 4) Following Reported Transaction(s) (Instr. 4) and 5) Amount or Number Date Expiration Date of Shares v (D) Title Code (A) Exercisable Explanation of Responses:

6. Date Exercisable and

Expiration Date

(Month/Dav/Year)

7. Title and

Amount of Securities

Underlying Derivative

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 March 1, 2024.

2. Represents shares underlying DSUs and Common Stock.

3. Transaction

(Month/Day/Year)

Date

1. Title of

Derivative

Security

(Instr. 3)

2 Conversion

or Exercise

Price of Derivative

Jack W. Callicutt, by power of 04/17/2023 attorney

8. Price of

Derivative

Security

(Instr. 5)

9. Number of

derivative

Securities

Owned

Beneficially

10.

Ownership Form:

11. Nature of Indirect

Beneficial

Ownership (Instr. 4)

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

3A. Deemed Execution Date,

if any (Month/Day/Year)

4. Transaction Code (Instr.

8)

5. Number

Derivative

* 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.