FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| ١ | ٨ | Va | 25 | h | iin | ata | n. | D. | C. | 20 |)54 | 9 | | |
|---|---|----|----|---|-----|-----|----|----|----|----|-----|---|--|--|

| Washington, D.C. 20549 | OMB APPROVAL | | | |
|--|--------------|-----------|--|--|
| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: | 3235-0287 | | |

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

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

| 1. Name and Address of Reporting Person* Uihlein Richard E | | | | | | 2. Issuer Name and Ticker or Trading Symbol GALECTIN THERAPEUTICS INC [GALT] | | | | | | | | | lationship o ck all applic | | g Person(| s) to Issue | • |
|---|---|--|---|--|-------|--|-------------|---------------|---|----------------------|--------|--|------------------|------------------|---|------------------------------------|--|--|---|
| Ulniein | Richard | <u>L</u> | | | | 220111 | | | 11 20 | 110 | U II , | <u>o</u> [0.1. | | 3 | _ | | X | 10% O | · |
| (Last) (First) (Middle) C/O GALECTIN THERAPEUTICS INC. 4960 PEACHTREE INDUSTRIAL BLVD., STE 240 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/16/2021 | | | | | | | | | Officer below) | (give title | | Other (below) | specify |
| (Street) NORCROSS GA 30071 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | - 1 | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | ´ | | | |
| (City) | (5 | State) | (Zip) | | | | | | | | | | | | | | | | |
| | | | Table I - Nor | ı-Deri | vativ | Securi | ies A | Acqu | ıired, C | Disp | osed | of, or E | Benefi | cially C | wned | | | | |
| Date | | | | | | 2A. Deemed Execution D if any (Month/Day | | , | | ansaction de (Instr. | | urities Acquired (A) o sed Of (D) (Instr. 3, 4 a | |) or 4 and 5) | | s ally Owne g Reporte | Form: | nership Direct (D) irect (I) 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amoui | nt (| (A) or (D) Price | | (Instr. 3 | | | | (1130.4) |
| | | | Table II - | | | Securition calls, w | | • | • | • | | , | | • | vned | | | | |
| 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) | 4. Transa Code (8) | | Disposed o | erivative | | 6. Date Exerci Expiration Da (Month/Day/Y | | e and | 7. Title and Amount Securities Underlyi Derivative Security 3 and 4) | | lying | 8. Price of Derivative Security (Instr. 5) | deri Sec Ben Owr Follo | umber of vative urities eficially ed owing orted | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership ct (Instr. 4) |
| | | | | | | | Date Exe | e rcisable | | ration | Title | Amou Numb Share | er of | | | saction(s) | | | |
| Convertible Note | \$5 | 04/16/2021 | | A | | 2,000,000(1 | | | (2) | 04/10 | 6/2025 | Common Stock | 2,00 | 0,000(1) | \$10,000,00 |)(3) 10 | ,000,000 | D | |

Explanation of Responses:

- 1. Excludes interest that may accrue following issuance of the Note.
- 2. The Note is convertible upon 60 days prior written notice by the noteholder.
- 3. In consideration for the Convertible Note, the Reporting Person loaned ten million dollars to the Company.

Remarks:

/s/ Jack W. Callicutt, by power of 04/19/2021 <u>attorney</u>

** Signature of Reporting Person

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.