SEC For	m 4 FORM	4 U		D STAT	ES S	SEC					XCHAN	IGE (сом	IMIS	SIO	N			
		Washington, D.C. 20549											OMB APPROVAL						
to Section 16. Form 4 or Form 5 obligations may continue. See					pursua	T OF CHANGES IN BENEFICIAL OWNERSH 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 hours per response:			
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]								Officer (give title Other			10% O\	wner	
(Last)	(Last) (First) (Middle)													Х	below			below)	specity
C/O GALECTIN THERAPEUTICS INC. 4960 PEACHTREE INDUSTRIAL BLVD., STE 240						3. Date of Earliest Transaction (Month/Day/Year) 03/05/2021										President	and CE	0	
					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														X Form filed by One Reporting Person					on
NORCROSS GA 30071													Form filed by More than One Reporting Person						
(City) (State) (Zip)																			
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of,	or Be	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) Date (Month/Day					Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and Securities Beneficial		ties cially I Following	6. Owne Form: Di (D) or In (I) (Instr.	rect lirect 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Pric	e	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock ⁽¹⁾ 03/05/2					2021				Α		27,027	A	\$2.	22 ⁽²⁾	21	4,684	D		
		Tal	ble II -								osed of, c convertibl				Owneo	d			
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8) Code (Instr. 9) 5. Numb of Derivati Acquirer (A) or Dispose of (D) (Instr. 3, and 5)		ative rities ired osed . 3, 4	6. Date Expirat (Month	ion Da		and 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5) tr.		9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	Own For Dire or li (I) (I	nership m: ect (D) ndirect nstr. 4)	11. Nature of Indirec Beneficia Ownershi (Instr. 4)		
													Amount or						

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.

Date Exercisable Expiration Date

2. Represents shares underlying DSUs and Common Stock.

Remarks:

/s/ Jack W. Callicutt, by power 03/08/2021

** Signature of Reporting Person Date

of Shares

Title

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).

Code V

(A) (D)

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.