SEC For				CT A	TEO							<u></u>				
FORM 4 UNITEI				D STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549										OMB APPROVAL		/AL
Section 16. Form 4 or Form 5 obligations may continue. See						T OF CHANGES IN BENEFICIAL OWNERS								OMB Number:         3235-0287           Estimated average burden            hours per response:         0.5		
1. Name and Address of Reporting Person <sup>*</sup> AMELIO GILBERT F (Last) (First) (Middle) C/O GALECTIN THERAPEUTICS INC.					3. Date of Earliest Transaction (Month/Day/Year)							LT (Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify below) below)			
4960 PEACHTREE INDUSTRIAL BLVD., ST				E 240	03/25/2021 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. In							ndividual or J	Joint/Group Filir	g (Check App	licable	
(Street) NORCROSS GA 30071												Line	ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State) (Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned         1. Title of Security (Instr. 3)       2. Transaction       2A. Deemed       3.       4. Securities Acquired (A) or       5. Amount of       6. Ownership       7. Nature																
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Date			Transaction Disposed C Code (Instr. 5)		l Of (D) (Instr. 3, 4 and		Securitie Beneficia Owned F	s For ally (D) ollowing (I) (I	orm: Direct ( )) or Indirect ( ) (Instr. 4)	of Indirect Beneficial Dwnership
									Code V	Amount	(A) oi (D)	Price	Reported Transact (Instr. 3 a	ion(s)		Instr. 4)
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 or Exercise (Month/Day/Year) if any		3A. Deemed Execution Da if any (Month/Day/	Date, Transad Code (I				ve es ed ed nstr.	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				с	ode	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock option (right to buy) <sup>(1)</sup>	\$2.11	03/25/2021			A		40,000		(2)	03/25/2031	Common Stock	40,000	\$0.00	40,000	D	
Stock option (right to buy) <sup>(1)</sup>	\$2.11	03/25/2021			A		70,000		(3)	03/25/2031	Common Stock	70,000	\$0.00	70,000	D	

## Explanation of Responses:

1. The options were issued pursuant to the Galectin Therapeutics Inc. 2019 Omnibus Equity Incentive Plan.

2. Such options vest 100% on March 31, 2022.

3. Such options vest when (i) the Company has received the interim results of its NAVIGATE clinical trial and (ii) makes a public announcement that it has received the interim results.

## **Remarks:**

(1) The reporting person is president and director of Ed Uihlein Family Foundation, a not-for-profit corporation. The reporting person has no pecuniary interest in the shares, however, he shares voting and dispositive power over the shares and, therefore, remains the beneficial owner of the shares solely for the purposes of Section 13(d) of the Securities Exchange Act of 1934.

<u>/s/ Jack W. Callicutt, by power</u>	03/29/2021
<u>of attorney</u>	03/29/2021

\*\* 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.