FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b)

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

1. Name and Address of Reporting Person* CALLICUTT JACK W						2. Issuer Name and Ticker or Trading Symbol GALECTIN THERAPEUTICS INC GALT							5. Relationship of Reporting P (Check all applicable) Director Officer (give title			10% Owner Other (specify	
(Last) (First) (Middle) C/O GALECTIN THERAPEUTICS INC. 4960 PEACHTREE INDUSTRIAL BLVD., STE 240					3. Date of Earliest Transaction (Month/Day/Year) 12/23/2024							below) below) Chief Financial Officer					
(Street) NORCROSS GA 30071 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)							Individue)	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - N	Ion-Deriv	ative	Securities Ac	quire	d, D	isposed o	f, or Be	eneficia	ally C	Owned				
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/				/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			5)	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock 12/23/20					024		M		40,000	A	\$0 ⁽¹	1)	47,614		D		
Common Stock 12/23/20					024		S		40,000(2)	D	\$0.887	73(4)	7,614		D		
		-	Table I			ecurities Acq alls, warrants							wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Executi if any			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	of Expiration I (Month/Day Securities Acquired A) or Disposed of (D) (Instr.			of Securi Underlyii	ities De ng Se e Security (Ir		Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Di or (I)	o. wnership orm: irect (D) · Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)

Date Exercisable

(3)

Expiration Date

(3)

Title

Commor

Stock

Explanation of Responses:

\$0⁽³⁾

Restricted

Stock

Units⁽³⁾

- 1. Shares of common stock acquired for no additional consideration resulting from vesting of Restricted Stock units.
- 2. Shares of common stock sold pursuant to previously disclosed 10b5-1 plan.

12/23/2024

- 3. Restricted Stock Units disposed upon conversion into shares of common stock pursuant to vesting on December 20, 2024.
- 4. Multiple transactions ranging from \$0.92 to \$0.85 with an average price of \$0.8873.

12/26/2024 Jack W. Callicutt

Amount or Number

Shares

40,000

\$0

** Signature of Reporting Person Date

0

D

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

M

(A)

40,000

(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.