FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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)

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

Name and Address of Reporting Person* ELDRED KARY						2. Issuer Name and Ticker or Trading Symbol GALECTIN THERAPEUTICS INC [GALT]								(Check all app		licable) tor	ng Person(s) to Iss 10% Ow Other (sp		wner
(Last) (First) (Middle) C/O GALECTIN THERAPEUTICS INC. 4960 PEACHTREE INDUSTRIAL BLVD., STE 240					3. Date of Earliest Transaction (Month/Day/Year) 07/22/2024									belov			pelow)		
					If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by Mars than One Reporting					son		
(Street) NORCR	(Street) NORCROSS GA 30071				Form filed by More than One Reporting Person Rule 10b5-1(c) Transaction Indication													orung	
(City) (State) (Zip)					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-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date			Date,	3. Transa Code (8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			4 and Securitie Beneficia		ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or Pr	ice	Transad (Instr. 3	ction(s)			(Instr. 4)
Common Stock 01/1					2024				P		400	A	\$	2.39	49	,713	D		
Common Stock															2,425		I		as UTMA custodian for minor child ⁽¹⁾
Common Stock														2,000		I		held in trust ⁽²⁾	
		Ta	ble II -							•	osed of,			•	Owne	d			
4 Tible of		2 Transastian	laa Da	· • · · ·		ilis, v			<u> </u>		onvertib	1		_	Duine of	0 Number	-f 40		44 Natura
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date curity or Exercise (Month/Day/Year) if any			ion Date,	4. Transactior Code (Instr.				6. Date Exerc Expiration Da (Month/Day/Y		ite	7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Own For Dire or I (I) (I	nership n: ct (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

- 1. These shares are held of record by the Reporting Person as custodian for a minor child under the Uniform Transfer to Minors Act. The Reporting Person disclaims beneficial ownership of these securities, and the filing of this report is not an admission that the Reporting Person is the beneficial owner of these securities for purpose of Section 16 or for any other purpose
- 2. These shares are held in a special needs trust for which the Reporting Person serves as a trustee. The Reporting Person disclaims beneficial ownership of these securities, and the filing of this report is not an admission that the Reporting Person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.

Jack W. Callicutt, by power of 07/23/2024

** 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.