SEC For	m 4 FORM -	4 U	NITE	D STAT	ES :	SEC	URITIE	S AN	ID E	XCHAN	GE C	OMI	NISSIO	N			
			Washington, D.C. 20549											OMB APPROVAL			
to Sect obligat	this box if no lo tion 16. Form 4 ions may contin tion 1(b).	or Form 5	STA		pursua	ant to S	section 16(a)	of the S	ecurit	NEFICIA ies Exchange mpany Act of	e Act of 19		RSHIP	Estim	Number: nated average bu s per response:	3235-0287 rden 0.5	
1. Name and Address of Reporting Person [*]					2. Issuer Name and Ticker or Trading Symbol <u>GALECTIN THERAPEUTICS INC</u> [GALT]								. Relationship of Reporting Person(s) to Issuer Check all applicable) X Director 10% Owner V Officer (give title Other (specify				
(Last)	(Fir	rst) (f	Middle)										X Diffe		below		
C/O GALECTIN THERAPEUTICS INC. 4960 PEACHTREE INDUSTRIAL BLVD., STE 240						3. Date of Earliest Transaction (Month/Day/Year) 02/07/2023							President and CEO				
						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) NORCROSS GA 30071												X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																	
		Table	I - No	n-Deriva	tive S	Secu	rities Acc	luired	, Dis	posed of,	or Ber	nefici	ally Owr	ned			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day						Execution Dat		Code (Inst		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)		(A) or 3, 4 an	d Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									v	Amount	(A) or (D)	Price	Transaction			(1150.4)	
Common Stock ⁽¹⁾ 02/07/20					.023			A		143,836(3)	Α	\$1.4	43 87	3,140 ⁽²⁾	D		
		Tal	ble II -							osed of, c convertibl				d			
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Executi rity or Exercise (Month/Day/Year) if any		emed 4. Transa Code (/Day/Year) 8)			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable an Expiration Date (Month/Day/Year)		ate ′ear)	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D) or Indirec (I) (Instr.	t (Instr. 4)		

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, amended on July 25, 2022. 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, 2028 and (iii) fifty percent shall be settled on March 1, 2024.

Date

Exercisable

2. Represents shares underlying DSUs and Common Stock.

3. Reflects 80% of 2022 performance bonus awarded to Mr. Lewis settled in DSUs.

Jack W. Callicutt, by power of 02/07/2023

attorney

Expiration Date

** Signature of Reporting Person Date

Amount or Number

Shares

of

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

(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.