Edgar Filing: CALLICUTT JACK W - Form 4

CALLICUT	Г JACK W										
Form 4											
April 06, 201											
FORM	$ 4 _{\text{UNITED}}$	SECUD	ITIES AT		יאטי	NCEO	OMMISSION	OMB APPROVAL			
UNITED STATES SE				ECURITIES AND EXCHANGE COMMISS Washington, D.C. 20549					OMB Number:	3235-0287	
Check thi if no long subject to Section 10	er STATE 6.									Expires: January 31 2005 Estimated average burden hours per	
Form 4 or Form 5 obligatior may conti <i>See</i> Instru 1(b).	Filed p ¹⁵ Section 1	response Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section									
(Print or Type R	Responses)										
			2. Issuer Name and Ticker or Trading Symbol GALECTIN THERAPEUTICS INC [GALT]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
C/O GALECTIN THERAPEUTICS, 04/04/ INC., 4960 PEACHTREE				of Earliest Transaction Day/Year) 2018				Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer			
INDUSTRIA	AL BLVD., ST	Е 240									
Filed(Mont				ndment, Date Original th/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
NORCROSS	S, GA 30071							Person		porting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if		3.4. Securities AcquiredTransaction(A) or Disposed ofCode(D)(Instr. 8)(Instr. 3, 4 and 5)				Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	or	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	04/04/2018			M <u>(1)</u>	3,349	A	\$ 0.87	4,609	D		
Common Stock	04/04/2018			S <u>(1)</u>	3,349	D	\$5	1,260	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

Edgar Filing: CALLICUTT JACK W - Form 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number prof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. l De See (In
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock option (right to buy)	\$ 0.87	04/04/2018		M <u>(1)</u>	3,349	(2)	12/03/2026	Common Stock	3,349	

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
CALLICUTT JACK W C/O GALECTIN THERAPEUTICS, INC. 4960 PEACHTREE INDUSTRIAL BLVD., STE 240 NORCROSS, GA 30071			Chief Financial Officer			
Signatures						

/s/ Jack Callicutt 04/06/2018

**Signature of

Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) The reported transaction was made pursuant to a Rule 10b5-1 plan adopted by the reporting person on February 28, 2018.
- (2) The options vested as follows: 25% on December 3, 2016, the grant date; 25% on July 1, 2017; and 50% on December 31, 2017.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.