Edgar Filing: GALECTIN THERAPEUTICS INC - Form 4

GALECTIN Form 4 August 20, 20	THERAPEUT	FICS INC										
FORM	1									PPROVAL		
	UNITE	Washington,					NGE (COMMISSION	OMB Number:	3235-0287		
Check this if no long subject to Section 10 Form 4 or Form 5 obligation may conti <i>See</i> Instru	er STAT 6. Filed I nue. Section 1	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 20(b) of the Investment Company Act of 1940						Expires: January 31, 2005 Estimated average burden hours per response 0.5				
1(b).												
(Print or Type R	lesponses)											
1. Name and A Greenberg A	Symbol	Name and				5. Relationship of Reporting Person(s) to Issuer						
			GALEC [GALT]	GALECTIN THERAPEUTICS INC [GALT]					(Check all applicable)			
INC., 4960 H	^(First) CTIN THERA PEACHTREE AL BLVD, ST		3. Date of (Month/Da 08/19/20	-	ansaction			X Director Officer (give below)		9 Owner er (specify		
	(Street) 4. If Amer Filed(Mont				-			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
NORCROSS	S, GA 30071							Form filed by M Person	More than One Re	eporting		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ities Acc	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executio any	med on Date, if Day/Year)	3. Transactic Code (Instr. 8) Code V	on(A) or Di (D) (Instr. 3,	ispose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	08/19/2014			Р	1,000	A	\$ 4.56	96,667	D			

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

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 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	Exercise any ice of (Month/E erivative		4. Transactic Code (Instr. 8)	FransactionNumberExpiration DateCodeof(Month/Day/Year)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Reporting Owners											
Reporting Owner Name / Address			Relationships								
				Director	10% Own	er Officer	Other				
Greenberg Arthur C/O GALECTIN THERAPEUTICS INC. 4960 PEACHTREE INDUSTRIAL BLVD, STE 240 NORCROSS, GA 30071			Х								
Signa	tures										
/s/ Jack W. Callicutt, as attorney-in-fact for Arthur Greenberg					08/20	/2014					
**Signature of Reporting Person				Date							
Expla	nation	of Respo	nses:								

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* 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. 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.