CZIRR JAMES C Form 4 June 20, 2018

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

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 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * CZIRR JAMES C

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

GALECTIN THERAPEUTICS INC

(Check all applicable)

OMB APPROVAL

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[GALT]

(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)

06/14/2018

_X__ Director 10% Owner Officer (give title __ Other (specify

C/O GALECTIN THERAPEUTICS. INC., 4960 PEACHTREE IND.

BLVD., SUITE 240

(Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

NORCROSS,, GA 30071

(City)	(State)	(Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	. 4. Securiti Transaction(A) or Dis Code (Instr. 3, 4 Instr. 8)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	06/14/2018		S	31,860 (1)	(D)	\$ 7.99 (1)	2,769,786	I (2)	See footnote		
Common Stock	06/14/2018		S	44,525 (1)	D	\$ 8.48 (1)	2,725,261	I (2)	See footnote		
Common Stock	06/15/2018		S	15,475 (1)	D	\$ 8.47 (1)	2,709,786	I (2)	See footnote		

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Common Stock
$$06/18/2018$$
 S $\frac{60,000}{(1)}$ D $\frac{\$}{9.06}$ 2,649,786 I $\frac{(2)}{2}$ See footnote

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

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SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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. Transa Code (Instr.	ction 8) I S (I	Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)
				Code	V ((A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

CZIRR JAMES C
C/O GALECTIN THERAPEUTICS, INC.
4960 PEACHTREE IND. BLVD., SUITE 240
NORCROSS,, GA 30071

Signatures

/s/ James C. Czirr 06/20/2018

**Signature of Date Reporting Person

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) Common shares should pursuant to a trading plan pursuant to Rule 10b5-1. Price represents the gross sales price less commissions and brokerage fees.

Reporting Owners 2

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- The transaction was consummated by 10X Fund, L.P., a Delaware limited partnership, and not by the Reporting Person. The Reporting Person is a managing member of 10X Capital Management, LLC, a Florida limited liability company acting as the general partner of 10X
- (2) Fund, L.P., and as such, may be deemed to have indirect beneficial ownership of all or a portion of the securities owned directly by 10X Fund, L.P. Mr. Czirr disclaims beneficial ownership of the reported securities except to the extent of his after fund payout pecuniary interest therein.

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.