SEC For																	
	FORM	UNITED STATES SECURITIES AND EXCHANGE COMM Washington, D.C. 20549											OMB APPROVAL				
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).						ENT OF CHANGES IN BENEFICIAL OWNER led pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940							SHIP	OMB Number: Estimated average hours per respon			3235-0287 n 0.5
1. Name and Address of Reporting Person [*] Rock Edwin						2. Issuer Name and Ticker or Trading Symbol <u>GLYCOMIMETICS INC</u> [GLYC]							Relationship o heck all applic Directo	able)	g Perso	on(s) to Issu 10% Ov Other (s	wner
(Last)(First)(Middle)C/O GLYCOMIMETICS, INC9708 MEDICAL CENTER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 09/02/2022							below)	Chief Med	dical (below)	
(Street) ROCKVILLE MD			20850		_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Lii	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				ı
(City) (State) (Zip)																	
1. Title of Security (Instr. 3) 2. Transa Date				nsactio				, Transaction Disposed Code (Instr.		of, or Benefic ities Acquired (A) o d Of (D) (Instr. 3, 4		d 5) Beneficia Owned F	s Illy ollowing	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
						Code V	Amount	(A) o (D)	Price	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)			
									luired, Dis s, options				/ Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/\	ate,	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		of Securit Underlyin	g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transact	re es ally g d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(A) (D) Date Expiration Date Expiration Date Title Amount or Number of Shares	s	Transaction(s) (Instr. 4)							
Employee																	

Explanation of Responses:

\$0 74

1. 25% of the shares underlying this option will vest on September 2, 2023 and the remaining underlying shares will vest in equal monthly installments over 36 months thereafter, subject to the Reporting Person's continued service with the Issuer through each such vesting date.

(1)

Remarks:

stock

buy)

option (right to

/s/ Brian F. Leaf, attorney-infact

Common Stock

09/01/2032

09/07/2022

200,000

D

** Signature of Reporting Person Date

200,000

\$0.00

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).

09/02/2022

** 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.

200,000