FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

vvasinington,	D.C.	20040	

OMB APPROVAL								
OMB Number	3235-028							

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# Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					01 3001	11011 30(11)	or tire	invesiment C	ompany Act	01 1340					
Name and Address of Reporting Person*  Wing People! W					2. Issuer Name and Ticker or Trading Symbol GLYCOMIMETICS INC [ GLYC ]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
King Rachel K.											2	Director		10% Ov	vner
													(give title	Other (s	specify
(Last)	(F	First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)					below)	D 11 .	below)			
C/O GLYCOMIMETICS, INC.						01/07/2016					President, CEO				
9708 ME	EDICAL CI	ENTER DRIVE													
				4.	If Ame	endment, [	Date o	of Original File	d (Month/Da	ıy/Year)	6. In	dividual or J	oint/Group Fil	ing (Check App	licable
(Street)											Line				
ROCKVILLE MD 20850		20850								2	X Form filed by One Reporting Person				
												Form fil Person	ed by More tl	han One Repor	ting
(City)	(9	State)	(Zip)									1 013011			
		Та	ble I - Non-D	Perivati	ve Se	ecurities	s Ac	quired, Di	sposed c	of, or Be	neficially	Owned			
1. Title of Security (Instr. 3)  2. Transc Date (Month/L					action 2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.			ed (A) or str. 3, 4 and 5	Beneficia Owned Fo	Form (D) o ollowing (I) (In	orm: Direct )) or Indirect ) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code V	Amount	(A) o (D)	r Price	Reported Transacti (Instr. 3 a	on(s)		(Instr. 4)
			Table II - De	rivative	e Sec	urities	Aca	uired. Dis	posed of	or Ben	eficially (	Owned	,	<u> </u>	
								s, options,		•	•				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	rcise (Month/Day/Year) if any (Month/Day/Year) 8) ive		Transa Code (	nsaction de (Instr. Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
Employee Stock Option (right to	\$5.22	01/07/2016		A		141,000		(1)	01/06/2026	Common Stock	141,000	\$0.00	141,000	D	

#### **Explanation of Responses:**

1. One-fourth of the shares underlying this option vest on January 7, 2017 and the balance of the shares vest in a series of 36 successive equal monthly installments thereafter, subject to the reporting person's continuous service as of each such vesting date.

### Remarks:

/s/ Brian F. Leaf, attorney-in-

fact

\*\* Signature of Reporting Person Date

01/11/2016

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

- $^{\star}$  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.

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.