FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Rock Edwin				2. Issuer Name <b>and</b> Ticker or Trading Symbol GLYCOMIMETICS INC [ GLYC ]									ck all app Direc	tor	ng Pe	10% O	vner			
(Last)	`	irst) (I	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/21/2023								X	Officer (give title below)  Chief Med		Other (sp below) lical Officer		specily		
9708 MEDICAL CENTER DRIVE					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)	ILLE M	ID 2	0850												Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(9	tate) (2	Zip)		Rule 10b5-1(c) Transaction Indication															
					Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In:															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				y/Year)   Exec		Deemed cution Date, y nth/Day/Year)		Transaction Disposed Of Code (Instr. 5)			s Acquired (A) of (D) (Instr. 3, 4			5. Amo Securi Benefi Owned Report	ties cially I Following	Forr (D) (	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) (D)	or P	rice	Transa	Transaction(s) (Instr. 3 and 4)			(Instr. 4)				
Common	2023				P		35,000	A	\$	31.38 <sup>(1)</sup>	345,000			D						
Common Stock 09/22					2023				P		30,403	A	\$	31.38 <sup>(2)</sup>	375,403		D			
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		if any	emed tion Date, n/Day/Year)	4. Transa Code ( 8)			G. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Inst: 3 and 4)  Amour or Numbe of Title Shares		str. De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

- 1. The Reporting Person purchased the securities on the open market at purchase prices ranging from \$1.35 to \$1.40 per share, with a weighted average purchase price of \$1.38 per share. The Reporting Person undertakes to provide, upon request by the SEC staff, the issuer, or a security holder of the issuer, full information regarding the number of shares purchased at each separate price.
- 2. The Reporting Person purchased the securities on the open market at purchase prices ranging from \$1.37 to \$1.40 per share, with a weighted average purchase price of \$1.38 per share. The Reporting Person undertakes to provide, upon request by the SEC staff, the issuer, or a security holder of the issuer, full information regarding the number of shares purchased at each separate price.

## Remarks:

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

**fact** 

\*\* Signature of Reporting Person

09/25/2023 Date

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).
- \*\* 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.