FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT O	F CHANGES	IN BENEFICIAL	OWNERSHIP

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

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

1. Name and Address of Reporting Person* PEARSON TIMOTHY R						2. Issuer Name and Ticker or Trading Symbol GLYCOMIMETICS INC [GLYC]							(Ch	Relationship of Reporting Person (Check all applicable) X Director			son(s) to Iss	
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/19/2023							Officer below)	(give title		Other (spelow)	pecify	
C/O GLYCOMIMETICS, INC. 9708 MEDICAL CENTER DRIVE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person				
(Street)	ILLE M	D .	20850											Form f Persor		e than	One Repor	ting
(City)	(S	tate)	(Zip)			Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.						d to						
		Tab	le I - Noi	n-Deriv	ative	Sec	curities	Ac	quired, D	isp	osed o	f, or Be	neficial	ly Owne	d			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquire Disposed Of (D) (Instr. 5)			Benefici Owned	es ally Following	Form (D) or	Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership					
							Code	v	Amount	(A) o (D)	Price	Reporte Transac (Instr. 3	ction(s)			Instr. 4)		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any				ransaction of Ode (Instr. Derivative			6. Date Exercisable and 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 derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$1.98	05/19/2023			A		35,000		(1)	05/	/18/2033	Common Stock	35,000	\$0.00	35,000		D	

Explanation of Responses:

1. The shares underlying this option vest on May 19, 2024, subject to the reporting person's continuous service as of such vesting date.

Remarks:

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

fact

** Signature of Reporting Person Date

05/22/2023

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.