### GLYCOMIMETICS INC Form 3 April 01, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB approval

### INITIAL STATEMENT OF 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

(Print or Type Responses)

1. Name and Address of Reporting Person Å PEARSON TIMOTHY R			2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol GLYCOMIMETICS INC [GLYC]						
(Last)	(First)	(Middle)	03/31/201	4	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)			
C/O GLYCOMIMETICS, INC., 401 PROFESSIONAL DRIVE, SUITE 250 (Street) GAITHERSBURG, MD 20879					(Check all applicable) <u>X</u> Director Officer (give title below) (specify below)				<ul> <li>6. Individual or Joint/Group</li> <li>Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting</li> <li>Person</li> <li> Form filed by More than One</li> <li>Reporting Person</li> </ul>		
(City)	(State)	(Zip)		Table I - N	on-D	erivati	ve Securit	ties Be	neficially Owned		
1.Title of Security (Instr. 4)				2. Amount of Beneficially C (Instr. 4)			3. Dwnership Form: Direct (D) or Indirect I) Instr. 5)	4. Nat Owner (Instr.	•		
No securities b	eneficially	owned		0			D	Â			
Reminder: Report owned directly or i	ndirectly. Persons informati required	who respo ion contain to respon	ond to the c ned in this f	ollection of orm are not e form displa		SE	C 1473 (7-02	2)			
Tab	le II - Deriva	tive Securit	ies Beneficia	lly Owned (e.g	., puts,	, calls, w	arrants, op	tions, co	onvertible securities)		

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

### Edgar Filing: GLYCOMIMETICS INC - Form 3

Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships					
	D	irector	10% Owner	Officer	Other		
PEARSON TIMOTHY R C/O GLYCOMIMETICS, INC. 401 PROFESSIONAL DRIVE, SUITE 2 GAITHERSBURG, MD 20879 <b>Signatures</b>	250	ÂX	Â	Â	Â		
•							
/s/ Brian F. Leaf, Attorney-in-fact 04	04/01/2014						
**Signature of Reporting Person	Date						
Explanation of Responses:							

\* If the form is filed by more than one reporting person, *see* Instruction 5(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).

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### **Remarks:** Exhibit List Exhibit 24.1 - Power of Attorney

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.