FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Gaeta Anthony						2. Issuer Name and Ticker or Trading Symbol DESTINATION XL GROUP, INC. [DXLG]								[Che	elationship of the ck all applications of the characters of the ch	cable)	g Pers	son(s) to Iss 10% Ov Other (s	vner		
(Last)	,	rst) (N XL GROUP, II	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/01/2024								below)	вреспу 						
555 TURNPIKE STREET					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	·						
(Street)	N M	A	02021												Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)					R	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.														
		Tab	le I - Noi	n-Deri	vativ	e Se	curit	ties A	cqu	uired, I	Dis	osed o	of, or I	3en	eficiall	y Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/L					Execution Date,			r, Transaction Dispo Code (Instr. 5)		Dispose	urities Acquired (A) or sed Of (D) (Instr. 3, 4 a			5. Amou Securitie Benefici Owned F Reporte	es For ially (D) Following (I) (n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										Code	v	Amount	(A (D) or)	Price	Transact (Instr. 3	ion(s)			(111341. 4)	
Common Stock, \$0.01 par value 05/01				1/202	/2024			M		3,239 A		A	(1)	156,921			D				
Common Stock, \$0.01 par value 05/01/				1/202	1/2024				F		1,437 ⁽²⁾ D		D	\$3.21	155,484			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	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,		ransaction ode (Instr.		ı of l		Date Exe piration I onth/Day	Date	of Sec Underl Deriva		Fitle and Amount Securities derlying rivative Security str. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Own Forr Dire or In (I) (II	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Da Ex	te ercisable		opiration	Title	0 N 0	Amount or Jumber of Shares						
Restricted Stock Units	\$0	05/01/2024			M			3,239		(1)	05	5/01/2033	Commo Stock	n 3	3,239(3)	\$0	9,716		D		

Explanation of Responses:

- 1. Represents Restricted Stock Units ("RSUs") for time-based compensation granted to the Reporting Person on May 1, 2023 under the 2023-2025 Long-Term Incentive Plan. The remaining RSUs vest and become exercisable on April 1, 2025, April 1, 2026 and April 1, 2027.
- 2. Represents shares withheld from shares otherwise issuable upon vesting of RSUs for payment of taxes.
- 3. Each RSU, as defined in the Company's 2016 Incentive Compensation Plan, represents a contingent right to receive one share of DXLG common stock.

05/03/2024

** Signature of Reporting Person 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.