FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average b	urden								
- 1		0.5								

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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* REATH JAMES						2. Issuer Name and Ticker or Trading Symbol DESTINATION XL GROUP, INC. [DXLG]									[Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
	STINATION	N XL GROUP, II	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 10/07/2024 Officer (give title below) below) Chief Marketing Officer												,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
555 TUR	NPIKE ST	4 1	If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable								
(Street) CANTON MA 02021						4. II Americinent, Date of Original Filed (Month/Ddy/Year)									Line						
(City)	(S	tate)	(Zip)			Pelson															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Trans Date (Month/					ay/Year) 2A. Deemed Execution Date, if any (Month/Day/Year)		,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			I (A) or : 3, 4 and	5. Amou Securitie Benefici Owned F Reporte	es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										Code	v	Amount		(A) or (D)	Price	Transact	on(s)			(111341. 4)	
Common	Stock, \$0.0	1 par value	nr value 10/07/2024 M 10,946 A \$0 ⁽¹⁾ 25,918 D							D											
Common	Stock, \$0.0	1 par value		10/0	7/202	4				F		4,910	(2)	D	\$2.88	3 21,008 D					
		٦	Table II -									osed of, onverti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date,		ansaction ode (Instr.				Date Ex piration onth/Da	Date	nble and 7. Title and A of Securities Underlying Derivative Se (Instr. 3 and 4		s Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (or Indir (I) (Inst	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Da Ex	ite ercisab		Expiration Date	Title		Amount or Number of Shares						
Restricted Stock Units	(1)	10/07/2024			M			10,946		(3)		(3)	Com		10,946	\$0	10,94	7	D		

Explanation of Responses:

- 1. Restricted stock units (RSU) converted into common stock on a one-for-one basis.
- 2. Represents shares withheld from shares otherwise issuable upon vesting of RSUs for payment of taxes.
- 3. Represents RSUs granted pursuant to an Inducement Award to the Reporting Person on October 7, 2022. The remaining RSUs vest and become exercisable on October 7, 2025.

<u>James Reath</u> <u>10/09/2024</u>

** 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.