FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
rvasiliigtoii,	D.C.	20343	

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*     Rubin Elaine					2. Issuer Name and Ticker or Trading Symbol DESTINATION XL GROUP, INC. [ DXLG ]										ationship of Reportin all applicable) Director Officer (give title		10% Ow Other (s		wner
	Fir STINATION RNPIKE ST	N XL GROUP, I	Middle)	)	04/1	4/202	1				th/Day/Year)	0()		0 1	belov		- 500	below)	
(Street) CANTO	N MA		)2021 Zip)		4. IT A	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Line)  X Form filed by One Form filed by More Person								e Rep	porting Pers	on			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date			2. Transactio Date (Month/Day/Y	Execution (ear) if any		xecution Date, f any		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			and 5) Securitie Beneficia Owned F		ties cially I Following	Form (D)	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Transa	eported ansaction(s) istr. 3 and 4)			(Instr. 4)
Common	Stock, \$0.0	1 par valu		04/14/202	21				P		25,000	A	\$1.3173 <sup>(1)</sup> 25,000 D					D	
Common Stock, \$0.01 par value 04/14/2			04/14/202	21			P		15,000	A	\$1.33	393 <sup>(2)</sup>	15,000			I	By Spouse's IRA account		
		Ta	ble II								posed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if any	eemed ution Date, , th/Day/Year)	4. Transa Code ( 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rative rities ired r osed )	Expiration Date (Month/Day/Year) S U U D S S 3				e and nt of ities lying ative ity (Instr 4)  Amount	Der Sec (Ins	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	Code V (A) (D)			Date Exercisable		Expiration Date	Title	Number of Shares						

## **Explanation of Responses:**

- 1. The price reported in Column 4 is a weighted average price. The shares were purchased in multiple transactions at a price ranging from \$1.22 to \$1.34, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, and/or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in Footnote (1) to the Form 4.
- 2. The price reported in Column 4 is a weighted average price. The shares were purchased in multiple transactions at a price ranging from \$1.31 to \$1.34, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, and/or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in Footnote (2) to the Form 4.

Robert S. Molloy, Attorneyin-Fact for Elaine Rubin

04/16/2021

\*\* 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.