FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | |
| Estimated average I | nurden | | | | | | | | |

0.5

hours per response:

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* | | | | | 2. Issuer Name and Ticker or Trading Symbol DESTINATION XL GROUP, INC. DXLG | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | |
| Presser Mitchell | | | | | DESTRUCTION ALL GROOT, INC. [DALG] | | | | | | | | 1 | X | Direc | ector | | 10% Owner | | | |
| | | | | | - | | | | | | | | | \dashv | | | er (give title | | | (specify | |
| (Last) (First) (Middle) | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | | belov | v) | | below) | | |
| C/O DESTINATION XL GROUP, INC. | | | | 109/ | 09/28/2018 | | | | | | | | | | | | | | | | |
| 555 TURNPIKE STREET | | | | | | | | | | | | | | | | | | | | | |
| 333 TORWINE STREET | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | | |
| (Street) | | | | | | | | | | | | | | ' | Line) X Form filed by One Reporting Person | | | | | | |
| CANTO | N M | Α (| 02021 | | | | | | | | | | | | Form filed by More than One Reporting | | | | | | |
| | | | | | | | | | | | | | | | | Pers | | re tnan | One Rep | orting | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | | | | |
| | | Tabl | le I - Nor | n-Deriv | ative | Se | curitie | s Acc | uired, | Dis | posed o | f, or | r Bene | eficia | ally C | Owne | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | Day/Year) if a | | Execution f any | A. Deemed xecution Date, any Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ities Acquired (A) d Of (D) (Instr. 3, | | | 4 and S | | 5. Amount of Securities Beneficially Owned Following Reported | | nership Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | . [| Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common Stock, \$0.01 par value 09/28/ | | | | | 3/2018 | 3 | | | J | | 1,200 |) ⁽¹⁾ A | | \$2 | .5 | 304,838 | | | D | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | |
| | | | <u> </u> | | | | | ' | • | | | _ | | , | T | | | | . 1 | | |
| 1. Title of Derivative Security (Instr. 3) | vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any | | | | 4. Transaction Code (Instr. 8) | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | 8. Price of Derivativ Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | wnership orm: rect (D) Indirect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | | Date Exercisal | | Expiration Date | Title | or Nun of | ount nber res | | | | | | | |

Explanation of Responses:

1. Shares issued pursuant to the Director's elected form of compensation for participation in meetings of the Board of Directors and/or its committees.

Remarks:

Robert S. Molloy, Attorney-in Fact for Mitchell S. Presser

10/02/2018

** 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.