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 I | hurdon | | | | | | | | |

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

| | | | | | | | . , | | | | · · | | | | | | | | | | |
|--|--|--|--|-------------------|--------|---|------------|----------|-------------------------------------|---------|---|-------|-----------------|---|---|---|---|-------------|--|-----------|--|
| 1. 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) | | | | | | |
| KANTER HARVEY S | | | | | | DESTRUCTION ALL GROOT, INC. [DALO] | | | | | | | | 1 | X | Directo | ctor 10% | |)% O | wner | |
| (Last) | /Eii | ret) (| Middle) | | 3 D | nato (| of Earling | et Trans | action (M | lonth/ | Day/Vear) | | | \dashv | | Officer below) | (give title | | ther (| specify | |
| (Last) (First) (Middle) C/O DESTINATION XL GROUP, INC. | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/22/2020 | | | | | | | | | President and CEO | | | | | | |
| 555 TURNPIKE STREET | | | | | | | | | | | | | | | | | | | | | |
| (Street) | | | | | 4. If | Ame | endment | , Date o | f Original | l Filed | I (Month/Da | ay/Ye | ar) | | Individ ne) | ual or J | Joint/Group | Filing (Che | ck A | pplicable | |
| CANTO | N M. | Α (|)2021 | | | | | | | | | | | | | | iled by One | | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | Person | iled by Mor า | e tnan One | кер | orting | |
| | | Tabl | e I - Non | -Deriva | ative | Se | curitie | s Acc | quired, | Dis | posed o | of, o | r Bene | eficia | ally O | wned | | | | | |
| 1. Title of Security (Instr. 3) 2. Transar Date (Month/Da | | | | | ar) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code | Transaction Disp Code (Instr. 5) | | curities Acquired (A sed Of (D) (Instr. 3, | | | nd S B O | 5. Amount of Securities Beneficially Dwned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | , т | Reported Transaction(s) (Instr. 3 and 4) | | | | (msu. 4) | |
| Common Stock, \$0.01 par value 01/22/ | | | | | 2/2020 | | | | | V | 8,000 | 0 A | | \$ | 0 | 68,000 | | 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, Transaction | | | | | 6. Date E Expiratio (Month/D | е | le and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | 8. Price Deriva Securi (Instr. | tive d ty S 5) B C F R | D. Number of lerivative Securities Seneficially Dwned Following Reported Transaction (Instr. 4) | Ownersh Form: Direct (D or Indirec (I) (Instr. | D) ect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nun of | ount nber res | | | | | | | |

Explanation of Responses:

Remarks:

Harvey S. Kanter

01/23/2020

Date

** Signature of Reporting Person

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.