FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

vvasimigton,	D.O.	20040	

OMB AF	IB Number: 3235-028		
OMB Number:	3235-028		

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

	pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940	RSH	IP .	OMB Number: Estimated avera hours per respo	age burden	0.5	
ddle)	Issuer Name and Ticker or Trading Symbol     DESTINATION XL GROUP, INC. [ DXLG ]      One of Earliest Transaction (Month/Day/Year)     11/05/2018		tionship of R all applicabl Director Officer (giv below)	le)	g Person(s) to Issuer 10% Owner Other (specify below)		
021	4. If Amendment, Date of Original Filed (Month/Day/Year)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person					

Name and Address of Reporting Person*     Conacher Lionel F.						2. Issuer Name <b>and</b> Ticker or Trading Symbol  DESTINATION XL GROUP, INC. [ DXLG ]								heck a	nship of Reporti I applicable) Director	ng Per	son(s) to Is		
(Last) C/O DES	(Fi	rst) (	Middle)		3. Date of Earliest Transaction (Month/Day/Year)  11/05/2018  Officer (give title below) below) below)														
555 TURNPIKE STREET					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) CANTON MA 02021														X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (	Zip)																
		Tabl	e I - Noi	n-Deriv	/ative	Se	curitie	es Ac	quired,	Dis	posed o	f, or	Bene	eficia	ally O	wned			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			id S B O	Amount of ecurities eneficially wned Following eported	Form (D) o	vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
						Code V Amount (A)		A) or O)	Price	Ti	Transaction(s) (Instr. 3 and 4)			(msu. 4)					
Common	Stock, \$0.0	1 par value		11/05	5/2018	3			J		3,726	1)	Α	\$3.	43	10,116		D	
		Та									sed of, onvertib				y Owr	ned			
Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any				4. Transa Code ( 8)		n of r. Deriv Secu Acqu (A) o Disp of (D	r osed ) r. 3, 4	Expiratio	s. Date Exercisable and Expiration Date Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price Derivat Securit (Instr. !	derivative Securities	y C G G (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Code V (A) (D)					Date Exercisal		Expiration Date	Title	or	ount nber ires								

## **Explanation of Responses:**

1. The shares issued represent the Required Equity portion of the quarterly annual retainer pursuant to the Issuer's Third Amended and Restated Non-Employee Director Compensation Plan (as amended). The Reporting Person became a Participant during a fiscal year and therefore his Required Equity (50% of the retainer) is paid in shares.

## Remarks:

Robert S. Molloy, Attorney-in-Fact for Lionel Conacher

11/06/2018

\*\* 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.