SEC For	rm 4
	EODM

Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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 UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	32
Estimated average	burder

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

NERSHIP	OMB Number:	3235-0287
	Estimated average bur	den
4	hours per response:	0.5

1. Title of Security	(Instr. 3)		2. Transaction Date	2A. Deemed Execution Date,	3. Transaction	4. Securities Acquired (A Disposed Of (D) (Instr. 3,		5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect
		Table I - No	n-Derivative S	Securities Acq	uired, Dis	posed of, or Benef	ficially	Owned		
(City)	(State)	(Zip)								
(Street) DODGEVILLE	WI	53595		unenament, Date o			Line)	Form filed by On Form filed by Mo Person	e Reporting Per	rson
I LANDS END	LAINE		4 If A	Amendment Date o	f Original Filer	d (Month/Day/Year)	6 Indiv	/idual or Joint/Grou	n Filing (Check	Applicable
(Last) 1 LANDS' END	(First)	(Middle)		te of Earliest Trans 1/2024	action (Month/	′Day/Year)		Officer (give title below)	Other below	(specify /)
1. Name and Address of Reporting Person [*] Galvin Robert				uer Name and Tick NDS' END, I	0		5. Rela (Check	ng Person(s) to 10% (o Issuer o Owner	
defense condition 1(c). See Instruct		-								

	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transaction Code (Instr. 8)		Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership
			Code	v	Amount	Amount (A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	11/01/2024		A		990 ⁽¹⁾	Α	\$16.09	27,301	D	
Common Stock								3,500	Ι	By IRA
Common Stock								2,000	Ι	By SEP

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, c	alls, warrants, o	options, conv	ertible securities)
----------------	-------------------	---------------	---------------------

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of Deriv Secu Acqu (A) o Dispo of (D (Instr	5. Number 6. Date Exercisable and perivative (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		7. Titl Amou Secur Under Deriv Secur 3 and	int of rities rlying ative rity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents shares of common stock granted to the reporting person pursuant to his election under the Lands' End, Inc. Director Compensation Policy to receive a portion of the fees that would otherwise be payable to him in cash, in the form of shares of the issuer's common stock. Such shares were issued under the Lands' End, Inc. Amended and Restated 2017 Stock Plan.

/s/ Peter L. Gray, as Attorney-11/05/2024

in-Fact for Robert Galvin

** 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.