FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DС	20549
rvasiliigion,	D.C.	20040

STATEMENT	OF CHANGES I	N BENEFICIAL	OWNERSHIP

OMB APPROVAL											
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Estimated average burden											
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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* Henry Michael				2. Issuer Name and Ticker or Trading Symbol TILLY'S, INC. [TLYS]									all app Direc	licable)	ing Person(s) to				
(Last) (First) (Middle) C/O TILLY'S, INC. 10 WHATNEY				3. Date of Earliest Transaction (Month/Day/Year) 06/08/2022								Λ	below	,	FO	below)	. ,		
(Street) IRVINE (City)	CA (Sta		2618 (ip)		4. If #	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indiv Line) X	Form Form	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y			Year) i	Execution Date,		·	3. Transaction Code (Instr. 8) 4. Securities Acquir Disposed Of (D) (Ins		Acquire (D) (Ins	quired (A) or (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Transa	saction(s) c. 3 and 4)			(Instr. 4)
Class A Common Stock 06/08/202				22	:2		P		4,005	A	\$7.59	93(1)	2:	23,000		D			
Class A C	Common Ste	ock		06/09/20	22	22		P		2,000	A	\$7.5	4(2)	25,000			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	Prision pricise (Month/Day/Year) Date (Month/Day/Year) Fixed any (Month/Day				of Deriv	r osed) r. 3, 4	Expiration Date (Month/Day/Year) Amount of Securities Underlyin Derivative Security (3 and 4)			int of ities rlying ative ity (Instr. 4)	Der Sec (Ins	rice of ivative urity tr. 5)	derivative Securities		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$7.55 to \$7.6499 security holder of the Issuer, 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 this footnote.
- 2. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$7.52 to \$7.57, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, 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 this footnote.

Remarks:

/s/ Michael L. Henry

06/10/2022

** 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.