(Street)
RINCON

PR

00677

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| | | | | . 0 | r Sect | tion 30 | (h) of t | he Ínve | estmen | t Company A | \ct of | f 1940 |) | | | | | | | |
|--|--|------------------------------------|---|------------|---|--------------------|---|--------------------|-------------------|--|------------|----------------------------|---|---|--|--|---|--|--|--|
| 1. Name and Address of Reporting Person* Fund 1 Investments, LLC | | | | | 2. Issuer Name and Ticker or Trading Symbol TILLY'S, INC. [TLYS] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director | | | | | | |
| (Last) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/05/2024 | | | | | | | | | Officer (give title below) Officer (give title below) | | | | | | |
| 100 CAF UNIT 19 | | | | 4 | . If Am | nendm | ent, Da | ate of C | Original | Filed (Mont | h/Day | y/Yea | | . Individual or ine) Form | | Group Filio y One Rep | • | | . | |
| (Street) | N 1 | PR 0 | 0677 | - | - Dulo | 106 | | (a) T | rone | ootion I | ndi | oot | ion | Form Perso | | y More tha | an Or | e Repo | rting | |
| (City) | (| State) (2 | Zip) | | □ Ch | eck this | s box to | indicate | e that a | transaction wonditions of R | as ma | ade p | ursuant to a | contract, instruction 10. | uction o | r written pla | an tha | t is inten | ded to | |
| | | Table | I - Non-Deriva | ativ | re Se | curit | ties / | Acqui | ired. | Disposed | d of. | , or | Benefic | ially Own | ed | | | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Ye | | 2A. D Exec if any | Deemed oution D | | | action (Instr. | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at 5) | | i (A) or | 5. Amount of Securities Beneficially Owned Following | of | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | Code | v | Amount | (A) (D) |) or) | Price | Reported Transaction (Instr. 3 and | | | | Ì | | |
| Class A (| Common | Stock | 07/05/2024 | 4 | | | | P | | 30,500 | A | A | \$5.4734 | 5,931,9 | 03 | I | | See Footi | notes ⁽¹⁾⁽²⁾ | |
| Class A Common Stock | | | 07/05/2024 | 07/05/2024 | | | | P | | 50,000 | A | A | \$5.5219 | 5,981,9 | 03 |)3 I | | See Footnotes ⁽¹⁾⁽²⁾ | | |
| Class A Common Stock | | | | | | | | | | | | | | 1,559,510 | | | | See Footi | See Footnotes ⁽¹⁾⁽³⁾ | |
| Class A (| Common | Stock | | | | | | | | | | | | 633,46 | 56 | I | | See Footi | notes ⁽¹⁾⁽⁴⁾ | |
| | | Tal | ble II - Derivat (e.g., pu | | | | | | | isposed s, conve | | | | | d | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercis Price of Derivative Security | e (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | ansact ode (In | tion o | 5. Num of Derivat Securit Acquir (A) or Dispos of (D) (Instr. 3 | tive ties ed | xpiratio | Exercisable a on Date Day/Year) | nd | Amo Secu Und Deri | tle and ount of urities erlying vative urity (Instr. d 4) | 8. Price of Derivative Security (Instr. 5) | deriva Secur Benet Owne Follow Repor | rities ficially d wing rted action(s) | Forn Direct or In | ership n: ct (D) direct nstr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Co | ode V | v (| (A) (| | ate xercisa | Expira | tion | Title | Amount or Number of Shares | | | | | | | |
| | | of Reporting Person* | | | | | | | | | | | | | | | | | | |
| (Last) 100 CAF UNIT 19 | | (First) | (Middle) | | | | | | | | | | | | | | | | | |
| (Street) | V | PR | 00677 | | | | | | | | | | | | | | | | | |
| (City) | | (State) | (Zip) | | | | | | | | | | | | | | | | | |
| | | of Reporting Person* Onshore Feede | r Fund LP | | | | | | | | | | | | | | | | | |
| (Last) | OD 115 II | (First) | (Middle) | | | | | | | | | | | | | | | | | |

| (City) | (State) | (Zip) |
|-----------------------|--|----------|
| 1 | ress of Reporting Perso ke Partners LLC | n* |
| (Last) 100 CARR 11 | (First) 5 UNIT 1900 | (Middle) |
| (Street) RINCON | PR | 00677 |
| (City) | (State) | (Zip) |

Explanation of Responses:

- 1. Shares reported herein are held for the benefit of Pleasant Lake Onshore Feeder Fund, LP (the "PL Fund") and additional private investment vehicles for which Pleasant Lake Partners LLC ("PLP") serves as investment adviser. Fund 1 Investments, LLC serves as managing member of PLP, Jonathan Lennon serves as managing member of Fund 1 Investments, LLC. Each of the Reporting Persons disclaims beneficial ownership of the shares reported herein except to the extent of its or his pecuniary interest therein.
- 2. Shares held for the account of the PL Fund.
- 3. Shares held for the account of an unaffiliated private fund for which PLP serves as investment adviser ("Client 2").
- 4. Shares held for the account of an unaffiliated private fund for which PLP serves as investment adviser ("Client 3").

/s/ Fund 1 Investments, LLC,

by: Benjamin C. Cable, Chief 07/09/2024

Operating Officer

/s/ Pleasant Lake Onshore

Feeder Fund, LP, by Pleasant

Lake Partners LLC, its

Investment Adviser, by Fund 1 07/09/2024

Investments, LLC, its

Managing Member, by

Benjamin C. Cable, Chief

Operating Officer

/s/ Pleasant Lake Partners

LLC, by Fund 1 Investments,

07/09/2024 LLC, its Managing Member,

by Benjamin C. Cable, Chief

Operating Officer

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).