SEC For	rm 4																
FORM 4			UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549											OMB APPROVAL			
Section obligat	this box if no lo n 16. Form 4 or ions may conti tion 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										OMB Number: 3235-0287 Estimated average burden hours per response: 0.5					
1. Name and Address of Reporting Person [*] Lake Katrina					2. Issuer Name and Ticker or Trading Symbol <u>Stitch Fix, Inc.</u> [SFIX]							elationship of eck all applica	able)	,		ssuer Owner	
(Last) ONE MO	(F ONTGOME	(Middle) JITE 1100		3. Date of Earliest Transaction (Month/Day/Year) 01/06/2023							X Officer (give title Other (specify below) below) Chief Executive Officer				specify		
(Street) SAN CA FRANCISCO			94104	4	I. If Am	endment,	Date	of Original Filed (Month/Day/Year)			Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting				n	
(City)	(Zip)		vative Securities Acquired, Disposed of, or Beneficially Owned														
1. Title of Security (Instr. 3) Date				Transact	ion	2A. Deen Executio if any (Month/D	ned n Date	a, 3. Transactio Code (Ins	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		ed (A) or	or 5. Amount		Form Iy (D) o		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code V	Amount	(A) or (D)	r Price	Transactio (Instr. 3 ar	on(s)	n(s) d 4)		(1150.4)	
			Table II - De (e.					quired, Dis s, options,				Owned					
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. Trans Code 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)				
Class A Common Stock	\$3.64	01/06/2023		Α		150,000		07/05/2023 ⁽¹⁾	01/05/2033	Class A Common Stock	150,000	\$0	150,000		D		
Class A Common	\$3.64	01/06/2023		A		50 000		(2)	01/05/2033	Class A Common	50.000	\$0	50.0	00	D		

Explanation of Responses:

1. 100% of the shares subject to the Option will vest upon the earlier to occur of July 5, 2023 and the first day of employment of a successor Chief Executive Officer. The Option will be subject to full acceleration of vesting in the event of either a termination of Ms. Lake's employment as Chief Executive Officer by the Company without cause, whether or not in connection with a change in control, or resignation by Ms. Lake for good reason, prior to July 6, 2023.

2. 100% of the shares subject to the Option will vest upon the first day of employment of a successor Chief Executive Officer, provided her successor is offered the role prior to July 5, 2023. All vesting is subject to the Reporting Person's Continuous Service through the applicable vesting date.

Remarks:

Stock

/s/ Casey O'Connor Attorney-in-01/10/2023

Fact for Katrina Lake

Stock

** 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.