FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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 defense conditions of Rule 10b5-1(c). See Instruction 10.

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

Name and Address of Reporting Person*						2. Issuer Name <b>and</b> Ticker or Trading Symbol Stitch Fix, Inc. [SFIX]								5. R (Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Bacos Anthony						Strong in, me. [ of m ]									Direc	tor		10% O	wner	
(Look) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)								- [	Office below	er (give title v)		Other (: below)	specify	
(Last) (First) (Middle)  1 MONTGOMERY STREET						3. Date of Earliest Transaction (Month/Day/Year) 12/13/2024									Chie	Prod/Technology Officer			er	
I MONIGOMERT STREET																				
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
SAN	C	A 94104												Line	<i>'</i>	m filed by One Reporting Person				
FRANCI	SCO C														rm filed by More than One Repo					
(City) (State) (Zip)														Perso	on					
(Oity)	(50	ate) (2	_ip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transact Date					tion	ion 2A. Deemed Execution Date,			3. 4. Securities Acquired (A Disposed Of (D) (Instr. 3,			(A) or	or 5. Amount of sand Securities		6. Ownership Form: Direct		7. Nature of Indirect			
					(Month/Day/Year)		if any (Month/Day/Year)				5)			o, <del>-</del> and	Benefic	cially (D)		or Indirect	Beneficial Ownership (Instr. 4)	
						`			Code	v	Amount	(A) or Price		Dulaa	Reported Transaction(s)					
										\ <u>'</u>	Amount	(D)		FIICE	(Instr. 3	(Instr. 3 and 4)				
Class A Common Stock 12/13/2					.024			<b>S</b> <sup>(1)</sup>		16,720	Ι	D \$4.61		. 91	913,962		D			
		Tal	ble II -	Derivati	ve Se	curi	ties /	Acqu	ired, [	Disp	osed of,	or Be	nefi	icially	/ Owne	d				
				(e.g., pu	ıts, ca	alls, v	warra	ants,	optio	ns, c	onvertib	le se	curi	ties)						
1. Title of Derivative	2.	3. Transaction	3A. Dec	emed ion Date.	4.	4!	Securities Acquired		6. Date Exercise			7. Title and Amount of			3. Price of Derivative	9. Number derivative		10. Ownership	11. Nature of Indirect	
Security	Conversion or Exercise	Date (Month/Day/Year)	if any	,	Code (				(Month			Securities		:	Security	Securities	- 1	Form:	Beneficial	
(Instr. 3)	Price of Derivative		(Month	/Day/Year)	8)							Underlying Derivative		- 1	Instr. 5)	Beneficially Owned	´	Direct (D) or Indirect	Ownership (Instr. 4)	
	Security					(A) or Disposed of (D) (Instr. 3, 4 and 5)		Secur 3 and			curity (Instr. nd 4)			Following Reported	- 1	(I) (Instr. 4)				
															Transaction(s) (Instr. 4)					
													Amo	ount						
									Date		Expiration		Num of	nber						
					Code	v	(A)	(D)	Exercis	able	Date	Title	Shai	res						

## **Explanation of Responses:**

1. Shares were disposed of pursuant to a Rule 10b5-1 plan entered into on April 4, 2024.

## Remarks:

/s/ Casey O'Connor, Attorneyin-Fact for Anthony Bacos 12/19/2024

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.