Instruction 1(b).

FORM 4

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

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

Washington,	DС	20549
rvasiliigion,	D.C.	20040

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

## **OMB APPROVAL** 3235-0287 Estimated average burden hours per response: 0.5

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*  Wittman-Smith Lisa					nd Tick <u>.</u> [ JO	er or Tra	ading	Symbol				k all app Direc	,		10% Ov	
(Last) (First) (Middle) C/O JOANN INC. 5555 DARROW ROAD		3. Date of Earliest Transaction (Month/Day/Year) 02/24/2023							^	below			elow)			
(Street) HUDSON OH 44236 (City) (State) (Zip)		4. If A	Line) X Form filed by									filed by On	oup Filing (Check Applicable  One Reporting Person  More than One Reporting			
Table I - N	on-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or E	Benef	ficially	/ Own	ed			
Date		Exec ay/Year) if any		A. Deemed execution Date, any Month/Day/Year)				ies Acquired (A) Of (D) (Instr. 3,			5. Amo Securit Benefic Owned Reporte	ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) (D)	or P	rice		ction(s)			(,
Common Stock	02/24/2	2023	023			F		1,576	Г	) (	\$3.41	11,881		D		
Common Stock	02/27/	2023				A		41,188	A \$0		\$0.00	.00 53,069		D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																
		Transa Code (			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Dei Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Own Forn Dire or In (I) (Ii	ership n: ct (D) direct nstr. 4)	Beneficial Ownership (Instr. 4)		
Evaluation of Panagas		Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Numb of Share						

**Explanation of Responses:** 

## Remarks:

Title: SVP, Planning Replenishment & Supply Chain Optimization

/s/ Ann Aber, Attorney-in-Fact 02/28/2023

\*\* Signature of Reporting Person

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.