FORM 4

## UNITED

Washington, D.C. 20549

D STATES SE	CURITIES AND	<b>EXCHANGE</b>	COMMISSION
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## 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

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*     Comitale James J					2. Issuer Name and Ticker or Trading Symbol Ollie's Bargain Outlet Holdings, Inc. [ OLLI ]								heck all appli Director Officer	icable) or r (give title	Other	Owner (specify	
(Last) (First) (Middle) C/O OLLIE'S BARGAIN OUTLET HOLDINGS, INC					3. Date of Earliest Transaction (Month/Day/Year) 12/11/2024								below) below) SVP, General Counsel				
6295 ALLENTOWN BOULEVARD, SUITE 1  (Street) HARRISBURG PA 17112  (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - N	on-Deriv	vative	Sec	urit	ies Ac	auired	. Di	sposed c	of. or Be	neficia	Ily Owned	d		
1. Title of Security (Instr. 3) 2. Tra		2. Transac	etion 2A.   Execute   Execute   Exec		2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Securitie		es Acquired (A) or Of (D) (Instr. 3, 4 a		5. Amor Securiti	unt of 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	٧	Amount	(A) or (D)	Price	Transac (Instr. 3	ction(s)		(111341. 4)
Common Stock, par value \$0.001 per share 12/11/20			2024	024					5,325	A	\$66.4	8 8,	,465	D			
Common Stock, par value \$0.001 per share 12/11/20			2024				S		5,325	D	\$113.9	5(1) 3,	,140	D			
		Ţ	able II								posed of converti			y Owned			
Security or (Instr. 3) Pr	2. Conversion or Exercise Price of Derivative Security	Conversion or Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Derivative		on Date,	4. Transaction Code (Instr. 8)		on of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D) or Indirect (I) (Instr.	Beneficia Ownershi (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Option	\$66.48	12/11/2024			M			5,325	(2)		10/18/2031	Common Stock	5,325	\$0	1,775	D	

## **Explanation of Responses:**

1. The price reported in column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$113.76-114.20, inclusive. The reporting person undertakes to provide to the Issuer, any securityholder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

2. Options vest and become exercisable in 25% installments on each anniversary date of the grant, October 18, 2021, subject to continued service through each applicable vesting date. The reporting person was granted 7,100 options, of which 1,775 vested on October 18, 2022; 1,775 vested on October 18, 2023; 1,775 vested on October 18, 2024; and 1,775 vest on October 18, 2025.

## Remarks:

buy)

/s/ James J. Comitale

12/12/2024

\*\* 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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).