FORM 4

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

Washington.	D C	20540	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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 APPROVAL									
OMB Number: 3235-0287									
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hours per response:	0.5								

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-
4(-) 0 1 1 40

1(0). 0	ee mstruction	10.																	
1. Name and Address of Reporting Person* HOWARD JACK L					2. Issuer Name and Ticker or Trading Symbol Steel Connect, Inc. [ STCN ]							(Ch	eck all app	,	ng Pers				
(Last) (First) (Middle) C/O STEEL PARTNERS 590 MADISON AVENUE, 32ND FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 10/01/2024									Officer (give title below)  See Explanation of Responses				
(Street) NEW YORK NY 10022 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	e) Form	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
		Table	I - Noi	n-Deriva	tive S	Secu	rities	Acq	uired,	, Dis	posed of	, or	Bene	ficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)					Execution Date,		3. 4. Securitie Transaction Code (Instr. 8) 5.		es Acquired (A Of (D) (Instr. 3,		(A) or 3, 4 and	Securi Benefi	ecurities eneficially wned Following		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount	(A (D	A) or D)	Price	Transa	ansaction(s) estr. 3 and 4)			(11130: 4)
Common Stock, \$0.01 par value <sup>(1)</sup> 10/01/2					/2024				A		2,304(2)	) A S		\$0.00	) 11	114,828		D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	perivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any				ransaction of ode (Instr. Derivative		Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Insi 3 and 4)			3. Price of Derivative Security Instr. 5)	tive derivative ty Securities		0. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or Nun of						

- 1. The reporting person is a member of a Section 13(d) group that owns more than 10% of the Issuer's outstanding Common Stock. The reporting person disclaims beneficial ownership of the shares of Common Stock of the Issuer owned directly by the other members of the Section 13(d) group except to the extent of his pecuniary interest therein.
- 2. Shares acquired are shares of restricted stock awarded pursuant to the Issuer's 2020 Stock Incentive Compensation Plan (the "Incentive Compensation Plan"). Except as otherwise provided in the Incentive Compensation Plan, the shares of restricted stock vest on October 1, 2025, provided that the reporting person remains a director of the Issuer on such vesting date.

By: /s/ Maria Reda, as Attorney-in-Fact for Jack L.

10/02/2024

**Howard** 

\*\* 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.