FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	
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Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1/h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 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-

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(c). S	ee Instruction	10.																		
Name and Address of Reporting Person* Battistoni Joseph J						2. Issuer Name and Ticker or Trading Symbol LEE ENTERPRISES, Inc [LEE]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
																er (give title		Other (s		
(Last)	(First) (Middle)		3. Da	Date of Earliest Transaction (Month/Day/Year)									— beid	,		below)		
` ′	12/1	12/10/2024									V.P Sales and Marketing									
C/O LEE ENTERPRISES, INCORPORATED 4600 E. 53RD STREET																				
4000 E	SKD ST	CLE I			4 If A	If Amendment, Date of Original Filed (Month/Day/Year)								6.1	6. Individual or Joint/Group Filing (Check Applicable					
(Street)					',	4. II Amendinent, Date of Original Filed (Month/Day/Year)									Line)					
DAVEN	PORT I	A 5	2807												Form filed by One Reporting Person					
															Forr Pers	n filed by Mo	re thar	n One Repo	orting	
(City)	(State) (Zip)												Feit	SOII				
(- 9)																				
		Table	I - No	n-Deriva	ative S	Secu	rities	Acq	uired	, Dis	posed of	, or E	3ene	eficia	illy Owi	ned				
1. Title of Security (Instr. 3) 2. Transact				tion					3. 4. Securities Acquired (A)									7. Nature		
Date (Month/Day					Execution Date, y/Year) if any				Transaction Code (Instr. 3, 8) Disposed Of (D) (Instr. 3, 5)			s, 4 and	Bene	ficially	(D) or	or Indirect	of Indirect Beneficial			
				(Month/Day/Year)				Owned Following Reported				(I) (In:		Ownership (Instr. 4)						
								Code	v	Amount	(A) (D)	or	Price		action(s) 3 and 4)					
Common Stock 12/10/2						2024					2,441	D((1)	\$16.8	3 17,412			D		
		To	hla II	Dorivet	ivo Sa		tion	1 0011	irod I	Dian	osed of,	or Do	nof	ioioll	· Own	- d				
		Id	Die II -								convertib					eu				
1. Title of	2.	3. Transaction	3A. De	emed	4.		5. Nu	ımber	6. Date	Exerc	isable and	7. Titl	le and		8. Price of	9. Number	of 1	10.	11. Nature	
Derivative Security	Conversion or Exercise		Execut if any	Execution Date,		action (Instr.	of Deriv	ative	Expiration Date (Month/Day/Year)			Amount of Securities			Derivative Security	derivative Securities		Ownership Form:	of Indirect Beneficial	
(Instr. 3)	(Instr. 3) Price of (Month/L			n/Day/Year)	8)			Securities		Underlyin					(Instr. 5)	Beneficiall Owned	у [Direct (D) or Indirect	Ownership (Instr. 4)	
Derivative Security				Acquired (A) or		Derivative Security (Ins				nstr.		Following		(I) (Instr. 4)	(111511.4)					
					Disposed of (D)		3 and 4)			14)			Reported Transaction(
						(Instr. 3, 4 and 5)								(Instr. 4)						
			-			1 1		,			\vdash	Ame	ount							
													or	- 1						
					<u>.</u> .	l	l		Date		Expiration	 	Num	- 1						
		Code	٧	(A)	(D)	Exercis	sable	Date	Title	Sha	res									

Explanation of Responses:

1. Exercise of tax withholding right in connection with vesting of previously granted (and reported) restricted stock resulting in a deemed disposition of the withheld shares back to LEE.

/s/Timothy B. Gulbranson,

<u>Limited POA</u>, Attorney-in-

12/12/2024

Fact

** 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.