SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

3235-OMB Number: 0104

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 A Olsson Fr	ddress of Repo edrik	rting Person [*]	Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 12/19/2024 3. Issuer Name and Ticker or Trading Symbol <u>PVH CORP. /DE/</u> [PVH]						
(Last) (First) (Middle) C/O PVH CORP. 285 MADISON AVENUE				4. Relationship of Reporting Issuer (Check all applicable) Director Øfficer (give title below)	10% C Other	Person(s) to 10% Owner Other (specify below)		 5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) 		
(Street) NEW YORK	NY (State)	10017 (Zip)			CEO, PVH I	EMEA			Person	by One Reporting by More than One Person
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)					2. Amount of Securities 3. Ownership		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
					4)	(D) or li (I) (Inst	ndirect		• • • •	-,
Common Stock, par value \$1 per share				0	I	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securit Underlying Derivative Securit (Instr. 4)				ise Form:	6. Nature of Indirect Beneficial Ownership (Instr.
			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivati Security	ve	Direct (D) or Indirect (I) (Instr. 5)	5)

Explanation of Responses:

Remarks:

/s/ Fredrik Olsson

** Signature of Reporting

12/30/2024

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 5 (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.

Date