FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIAL	. OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									

0.5

hours per response:

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

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*  NASELLA HENRY			2. Issuer Name <b>and</b> Ticker or Trading Symbol PVH CORP. /DE/ [ PVH ]									5. Relationship of Reporting Person(s) to (Check all applicable)					suer				
NASELLA HENKI														X	Direc	ctor		10% C	wner		
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 06/21/2018									Office	er (give title v)	Other below		specify				
C/O LNK PARTNERS				00/2	00/21/2010																
81 MAIN	STREET																				
				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street)																X	Form	n filed by One	e Repo	rting Pers	on
WHITE PLAINS	NY	7 1	.0601											Form filed by More than One Reporting Person							
																	1 013	OII			
(City)	(St	ate) (	Zip)																		
		Tabl	e I - Non-	-Deriva	ative	Sec	uritie	s Ac	quire	ed, Di	sp	osed o	f, o	r Ben	efici	ally	Owne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)			Execution eay/Year) if any		cution Date,		Transaction Dispose Code (Instr. 5)			ities Acquired (A d Of (D) (Instr. 3,			4 and Se		5. Amount of Securities Beneficially Owned Following Reported		nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
								Co	de V		Amount		(A) or (D)	(A) or (D) Price		Transa	nsaction(s) tr. 3 and 4)			(Instr. 4)	
Common	Stock, \$1 p	ar value		06/21	/2018		A	Α .	1	940 <sup>(1)</sup> A		A	\$	0	22,080 <sup>(2)</sup>			D			
		Та	ble II - Do									ed of, on the second se				y Oı	vned		,		
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  Security  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  Execution Date, if any (Month/Day/Year)			Date, 1	Transaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year)				Ame Sec Und Deri	itle and ount of curities lerlying ivative curity (In	str. 3	Deri Seci	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	wnership orm: rect (D) Indirect	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	cisable	Ex	opiration	Title	or Nu of	ount mber ares						

## **Explanation of Responses:**

- 1. Represents shares subject to an award of restricted stock units. Each unit represents a contingent right to receive one share of Issuer's Common Stock. The units vest in full on the one year anniversary of grant. Vested shares are delivered as soon as practicable after they vest., unless delivery has been deferred by the reporting person.
- 2. Represents shares of Common Stock subject to awards of restricted stock units.

## Remarks:

Henry Nasella 06/21/2018

\*\* 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.