FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|------------------|
| | | | |

| | OMB APPRO | OVAL |
|---|------------------------|-----------|
| | OMB Number: | 3235-0287 |
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| 1 | hours por rosponso: | 0.5 |

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

| 1. Name and Address of Reporting Person* HOLMES JAMES | | | | | | 2. Issuer Name and Ticker or Trading Symbol PVH CORP. /DE/ [PVH] | | | | | | | | | Check a | all app Direc | olicable) ctor | | Owner |
|--|--|--|--------|--|-------|---|------------------------------------|-------------|--|-------------------------|--|---|--------------------------------|--|---|---|--|----------------------|----------------|
| (Last) (First) (Middle) C/O PVH CORP. 200 MADISON AVENUE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/03/2018 | | | | | | | | | X | Officer (give title below) SVP and C | | belov | (specify () |
| City | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | ection | tion 2A. Deemed Execution Date, | | 3. 4. Securi | | 4. Securiti | ies Acquired (A) or Of (D) (Instr. 3, 4 a | | | 5. Amou Securiti Benefic Owned | | ount of ities icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | Code | v | Amount | (A (D | or | Price | - 1. | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | | |
| Common Stock, \$1 par value 04/03/2 | | | | /2018 | 2018 | | F | | 72(1) | 72 ⁽¹⁾ D \$1 | | \$155 | .16 | 16 4,802 ⁽²⁾ | | D | | | |
| Common Stock, \$1 par value | | | | | | | | | | | | | | | 419.4 | | I | By 401(k) Plan | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| Derivative Conversion Date Execution Date, T Security or Exercise (Month/Day/Year) if any | | | | ransaction of Deri Section (A) (Dispose of (E) | | osed) r. 3, 4 | 6. Date E Expiratio (Month/D | n Dat | | | int of rities rlying ative rity (Ins | str. 3 | Deriva | Price of Privative Curity Str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amo or Num of Shai | ber | | | | | |

Explanation of Responses:

- 1. Represents shares withheld to satisfy the Reporting Person's tax obligations in connection with the vesting of 252 restricted stock units. The restricted stock units were included as directly owned shares in prior fillings.
- 2. Includes 4,278 shares of Common Stock subject to awards of restricted stock units.

Remarks:

<u>James Holmes</u> <u>04/05/2018</u>

** 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.