Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Nashington, | 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 |
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Coughlin Zachary | | | | | 2. Issuer Name and Ticker or Trading Symbol PVH CORP. /DE/ [PVH] | | | | | | | | | | k all app Direc | ionship of Reporting all applicable) Director | | 10% Ov | vner |
|--|---|--|---------------------------------------|-----------------------------------|--|---|---|-----|--|----------|--------------------------------------|--|--|---|--|---|--------------------------------------|--|--|
| (Last) | • | rst) (f | /liddle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/02/2023 | | | | | | | | X | belov | , | inanc | Other (s below) | ` |
| 285 MADISON AVENUE | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Stroot) | | | | | 1 | | | | | | | | | | X Form filed by One Reporting Person | | | | |
| (Street) NEW YORK NY 10017 | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | (St | tate) (2 | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | | | | |
| | | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | | | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secui | rities | Acc | uired | , Dis | posed of | , or E | Benefic | cially | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Execu | Deemed ution Date, / th/Day/Year) | | | | | s Acquired (A) f (D) (Instr. 3, 4 | | and Securi Benefi Owned | | ies cially Following | Forn (D) c | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | | v | Amount | (A) (D) | Price | е | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common | nmon Stock, \$1 par value 05 | | | 05/02/2 | 2023 | | | F | | 2,888(1) | D | \$84.11 | | 30,406.924(2) | | | D | | |
| | | Tal | ole II - | | | | | | | | osed of, convertib | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | emed tion Date, n/Day/Year) | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exerc Expiration Da (Month/Day/Y | | ate | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | De Se (In | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | у | 10. Ownership 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 | Amount or Number of Shares | | | | | | |

Explanation of Responses:

- 1. Represents shares withheld to satisfy the Reporting Person's tax obligations in connection with the vesting of 5,282 restricted stock units. The restricted stock units were previously reported as directly owned shares.
- 2. Includes 24,967 shares of Common Stock subject to awards of restricted stock units.

Remarks:

/s/ Zachary Coughlin

05/03/2023

** 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.