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PVH CORP.	/DE/										
Form 4											
April 07, 201	16										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSIO									OMB APPROVAL		
Washington, D.C. 20549							NGE C	OMMISSION	OMB Number:	3235-0287	
Check this box if no longer									Expires:	January 31, 2005	
subject to	5 SIAIE	EMENT O	F CHAN	NGES IN BENEFICIAL OWN				NERSHIP OF	Estimated average		
Section 1 Form 4 o				SECURITIES					burden hours per		
Form 5		ursuant to	Section 1	6(a) of the	- Securit	ies F	vchang	e Act of 1934,	response	0.5	
obligation	ns Section 1'						•	1935 or Section	n		
may cont See Instru	inue.			vestment	•	· ·					
1(b).	letion				1	-					
(Print or Type F	Responses)										
1 Nama and A	ddrass of Dapartin	ng Dorson *	. .		T . 1			5 Delationship of	Deporting Dars	on(s) to	
				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
GIULDLIVI			Symbol PVH C(ORP. /DE	/ [PVH]						
(1 +)	(F :+)	(M (141.)						(Chec	k all applicable)	
(Month/Da			ate of Earliest Transaction onth/Day/Year) 05/2016				Director 10% Owner X Officer (give title Other (specify				
				nderent Dete Original				CEO Tommy Hilfiger & PVH Europe			
			nendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
1 1100(1001							_X_ Form filed by One Reporting Person				
NEW YOR	K, NY 10001							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	o I - Non-D	orivotivo	Socur	ities Aca	uired, Disposed of	or Beneficial	ly Owned	
1.Title of	2 Turnerstian D						-			-	
Security	2. Transaction Da (Month/Day/Yea	med 3. 4. Securities Acquired on Date, if Transaction(A) or Disposed of (D)					5. Amount of Securities	6. Ownership Form: Direct			
(Instr. 3)		any		Code (Instr. 3, 4 and 5)				2		Beneficial	
		(Month/I	Day/Year) (Instr. 8)					Owned Following	Ownership		
								Reported	(Instr. 4)	(Instr. 4)	
						(A) or		Transaction(s)			
				Code V	Amount		Price	(Instr. 3 and 4)			
Common							\$				
Stock, \$1	04/05/2016			F	648 <u>(1)</u>	D	\$ 96.49	24,911 <u>(2)</u>	D		
par value							70.77				

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

11 1110 01		or manoaenon Date	ern Deennea	••	е.	or Date Liter	ciouore una	/	ie une	0.11100 01
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transac	tionNumber	Expiration D	ate	Amou	int of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative	e		Secur	ities	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired			,	,	
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
					4, and 5)					
									Amount	
						D .			or	
						Date	Expiration	Title	Number	
						Exercisable	Date		of	
				Code	V (A) (D)				Shares	
				code	(\mathbf{D})				Silares	

4.

Reporting Owners

1. Title of 2.

Reporting Owner Name / Address		Relationships							
1 0			10% Owner	Officer	Other				
GRIEDER DANIEL C/O TOMMY HILFIGER U.S.A, INC. 601 WEST 26TH STREET NEW YORK, NY 10001				CEO Tommy Hilfiger &PVH Europe					
Signatures									
Daniel Grieder	04/07/2016								
**Signature of	Date								

Explanation of Responses:

If the form is filed by more than one reporting person, see Instruction 4(b)(v).

3. Transaction Date 3A. Deemed

- Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a). **
- Represents shares withheld to satisfy the Reporting Person's tax obligations in connection with the vesting of 1,778 restricted stock units. (1)
- (2) Includes 18,115 shares of Common Stock subject to awards of restricted stock units.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Person

6. Date Exercisable and 7. Title and

8. Price of

9. Nt

Deriv Secu Bene Own Follo Repo Trans (Insti

5.

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