FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | OMB APPROVAL | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | |
| l | Estimated average burden | | | | | | | | | |
| l | hours per response: | 0.5 | | | | | | | | |

| | Check this box if no longer subject |
|--------|-------------------------------------|
| \Box | to Section 16. Form 4 or Form 5 |
| \cup | obligations may continue. See |
| | Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Yancey Carol B | | | | | | 2. Issuer Name and Ticker or Trading Symbol OXFORD INDUSTRIES INC [OXM] | | | | | | | | (CI | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|--|--|-------|---------|---|---|--|---|------------------------------------|----------|------|--|--|-----------------|---|---|--|--|--|---|--|
| (Last) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/30/2023 | | | | | | | | | | Offic belo | cer (give title w) | | Other (below) | specify | |
| 999 PEACHTREE STREET, N.E., SUITE 688 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) | Street) ATLANTA GA 30309 | | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) | | | | | 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 - Noi | n-Deriva | tive S | ecui | rities | Acq | uired, I | Disp | osed of | f, or | Ben | efici | ally Ow | ned | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Executy/Year) if any | | Deemed cution Date, y nth/Day/Year) | | | | | ities Acquired (A d Of (D) (Instr. 3, | | | Secu Bene Owne Follo | ficially ed wing | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code V | | Amount | (| A) or D) | Price | Trans | Reported Transaction(s) (Instr. 3 and 4) | | | | |
| Common Stock 06/30/2 | | | | | | 2023 | | | A | | 1,168 | | A | \$ <mark>0</mark> (1 | .) | 2,698 | | D | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any | | | 4. Transaction Code (Instr. 8) | | Secu Acqu (A) o Disp of (D | vative irities ired ir osed) r. 3, 4 | 6. Date E Expiratio (Month/D | n Da | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and | | f g | 8. Price of Derivative Security (Instr. 5) | ative derivative rity Securities | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | | | Expiration Date | Title | or Nur of | ount mber ares | | | | | | |

Explanation of Responses:

1. The securities reported constitute restricted shares granted by the Issuer under the Oxford Industries, Inc. Long Term Stock Incentive Plan relating to the reporting person's annual retainer as a non-employee director of the Issuer.

/s/ Suraj A. Palakshappa, Attorney-in-Fact

07/03/2023

** 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.