FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL								
OMB Number: 3235-0104								
Estimated average burden								
hours per response:	0.5							

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* SENNETT SCOTT D 2. Date of Event Requiring Statement (Month/Day/Year) 03/25/2010			nent	3. Issuer Name and Ticker or Trading Symbol OXFORD INDUSTRIES INC [OXM]							
(Last) (First) (Middle) 222 PIEDMONT AVENUE, NE				Relationship of Reporting Perso (Check all applicable) Director		10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) ATLANTA	X1	30308			X	Officer (give title below) Group Preside	Other (spe below) ent	cify		cable Line) Form filed by	/Group Filing (Check y One Reporting Person y More than One erson
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					int of Securities ially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock						25,000 ⁽¹⁾	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable a Expiration Date (Month/Day/Year)		ate	Underlying Derivative Security (Instr. 4) Conv		Conve or Exe	ercise Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Price of Derivation Securi	tive	Direct (D) or Indirect (I) (Instr. 5)	

Explanation of Responses:

 $1.\ These \ shares \ represent \ restricted \ shares \ granted \ pursuant \ to \ the \ Oxford \ Industries, Inc.\ Long-Term \ Stock \ Incentive \ Plan.$

<u>/Suraj A</u>
<u>Palakshappa/Attorney-In-Fact</u> <u>04/05/2010</u>
<u>for Scott D Sennett</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 5 (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.