FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPI	ROVAL						
OMB Number:	3235-0104						
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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

	dress of Reporting	ESLEY JR (	2. Date of Event Requiring Statement (Month/Day/Year) 08/30/2011  3. Issuer Name and Ticker or Trading Symbol OXFORD INDUSTRIES INC [OXM]									
(Last) 222 PIEDMO	(First) NT AVENUE,	(Middle)	,			tionship of Reporting Perso all applicable) Director	10% Owner Other (specify below)		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) ATLANTA	Street)				X	Officer (give title below)  GROUP PRESI			6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						int of Securities ally Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock						15,000 <sup>(1)</sup>	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 and Expiration Date (Month/Day/Year)		nd 3. Title and Amount of Secur Underlying Derivative Securi		ity (Instr. 4) Cor		rsion rcise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Price of Derivation	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>
Palakshappa/Attorney-In-Fact 09/06/2011
for James Wesley Howard, Jr.

\*\* 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.