SEC Form 5

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FORM 5

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 **ANNUAL STATEMENT OF CHANGES IN BENEFICIAL**

OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0362						
Estimated average burden						
hours per response:	1.0					

Form 3	B Holdings Rep	•••••							rs per res	sponse:	1.0				
Form 4	Transactions	Reported.	Filed				e Securities Excha ment Company Ad								
1. Name and Address of Reporting Person [*] LOVE DENNIS M			2. Issuer Name and Ticker or Trading Symbol <u>OXFORD INDUSTRIES INC</u> [OXM]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
(Last) 999 PEA	(Fir CHTREE S	st) (I STREET, N.E., S	Middle) SUITE 688	3. Statement for Issuer's Fiscal Year Ended (Mo 01/29/2022					y/Year)		Officer (give title Other (spe below) below)				
(Street) ATLAN (City)			:0309 Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)						Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Table	I - Non-Deriva	tive Securi	ties Acc	quire	d, Disposed	of, or	Benefici	ally Own	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			2A. Deemed Execution Date, if any (Month/Day/Yea	cution Date, Transaction Code (Instr.				.) or Dispose	osed 5. Amount of Securities Beneficially Owned at end of		6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership		
			(montan Day) rea	, 0,		Amount	(A) or (D)	Price	Issuer's	ssuer's Fiscal /ear (Instr. 3 and			str. 4)		
Common Stock 05/04/2021															
Common	Stock		05/04/2021		G	5	1,200	D	\$0	20,	122	Г)		
Common	Stock	Ta	ble II - Derivat		es Acqu	uired		f, or E	Beneficia	lly Owne		E)		

Explanation of Responses:

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

Amount or Number

of Shares

Title

03/22/2022

** 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.

(A) (D) Date Exercisable

Expiration Date