## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	ne Response	e)							- г	. ,									
(Print or Type Responses)  1. Name and Address of Reporting Person * Sumner Susan Denise					2. Issuer Name and Ticker or Trading Symbol Kontoor Brands, Inc. [KTB]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X Officer (give title below)  VP & Chief Accounting Officer					
(Last) (First) (Middle) 400 N. ELM STREET				3. Date of Earliest Transaction (Month/Day/Year) 02/21/2020															
(Street) GREENSBORO, NC 27401				4. If Amendment, Date Original Filed(Month/Day/Year)								r)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City)		(State)		(Zip)			Ta	ble I -	- Nor	ı-Der	ivative S	Securitie	es Acq	uired, Disp	osed of, or I	Beneficially	Owned		
1.Title of Security (Instr. 3)		(Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)			(A) or Disposed of (D) (Instr. 3, 4 and 5)						6. Ownership Form: Direct (D)	p of Be	7. Nature of Indirect Beneficial Ownership		
							Со	de	V	Amoun	(A) or (D) Price					or Indirect (I) (Instr. 4)	t (In	nstr. 4)	
Common	Stock		02/21/	2020				F	7		313	D	\$ 39.0	7 6,503.9	28		D		
(Instr. 3)		3. Transaction Date (Month/Day)	Year) E	3A. Deemed Execution Da		tte, if Transaction Code Year) (Instr. 8)		ies Acquired arrants, opti 5. (		d, Disposed of		f, or Benefici ible securitie isable 7. n Date An Year) Ui			8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	of 10. Owner Form o y Deriva Securi Direct or Indi	of ative ty: (D) irect	11. Natur of Indirec Beneficia Ownershi (Instr. 4)
						Code		(A)	. 5)	Date Exer		Expirati Date	on Tit	Amount or Number of Shares					
Report	ting O	wners																	
Reporting Owner Name / Address Director Owner			Relationships																
			Director		Officer					Other									
Sumner Susan Denise 400 N. ELM STREET GREENSBORO, NC 27401					VP & Chief Account				ing (	ng Officer									
Signat	ures																		

/s/ Laurel Krueger for Susan Denise Sumner (Pursuant to Signing Authority on File)	02/25/2020
**Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* 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.

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.