FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
|-------------|------|-------|--|
|-------------|------|-------|--|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

| Name and Address of Reporting Person* Mizzi Douglas W. | | | | | | 2. Issuer Name and Ticker or Trading Symbol TJX COMPANIES INC /DE/ [TJX] | | | | | | | | (Chec | k all app Direc | tionship of Reportir all applicable) Director Officer (give title | | son(s) to Is 10% Ov Other (s | wner | |
|---|--|-------|------------------------------|-----------------|---------|--|--|--|---|-------|---------------------------|---|--|----------------------------|--|--|---|------------------------------------|------|--|
| (Last) (First) (Middle) THE TJX COMPANIES, INC. 770 COCHITUATE ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/20/2020 | | | | | | | | X | | below) bel | | | | |
| (Street) FRAMIN (City) | NGHAM M | | 1701 Zip) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi Line) X | ′ | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secui | rities | Acq | uired | , Dis | posed of | , or E | Benefi | cially | / Own | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day) | | | | Execution Date, | | | ate, | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | ired (A) on the str. 3, 4 | 4 and Securi Benefi | | ies cially Following | Form: | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code V | | Amount | (A) or (D) Pr | | e | Transaction(s) (Instr. 3 and 4) | | | | | |
| Common Stock 03/20/2 | | | | | 2020 | | F | | 11,036 | D | \$3 | 7.37 | 37 108,146 | | | 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) | perivative lecurity (nstr. 3) Security Conversion or Exercise (nstr. 3) Price of Derivative Security Date (Month/Day/Year) Execution Date, (if any (Month/Day/Year) | | 4. Transa Code (8) | Instr. | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of Title Share | | De Se (In | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | y D | O. Ownership Form: Oirect (D) Or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |

Explanation of Responses:

Remarks:

/s/ Erica Farrell, by Power of Attorney dated May 3, 2019

03/24/2020

** 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.