FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
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| STATEMENT | OF | CHANGES | IN E | BENEFIC | CIAL | OWNER | SHIP |
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| 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 Instruction 1(b).

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* GEORGE MICHAEL A | | | | 2. Issuer Name and Ticker or Trading Symbol RALPH LAUREN CORP [RL] | | | | | | | | 5. Relationship (Check all app X Direct | | licable) | ng Per | rson(s) to Is | | | |
|--|---|--|--|--|--|---|---|---|------------------|--|--------------------|--|---------------------------------------|------------------------------------|---|--|---|--------------------|--|
| (Last) | (Fir | st) (N | /liddle) | | 3. Date of Earliest Transaction (Month/Day/Year) 01/12/2024 | | | | | | | | | | Office below | er (give title v) | | Other (s below) | pecify |
| RALPH LAUREN CORPORATION 650 MADISON AVENUE | | | | 4. If <i>I</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | | | |
| (Street) NEW YO | ORK NY | ? | 0022 | | | | | | | | | | | | Form Perso | filed by Mo | re thar | n One Repo | orting |
| (City) | (Sta | ate) (Z | Zip) | | Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant satisfy the affirmative defense conditions of Rule 10b5-1(c). See | | | | | | rsuant to | a contract, instruction or written plan that is intended to struction 10. | | | | | | | |
| | | Table | I - Nor | n-Deriva | tive S | Secu | rities | Acq | uired, | Disp | posed of | , or I | 3enefi | cially | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | ay/Year) Execu | | Deemed cution Date, ny nth/Day/Year) | | | | ies Acquired (A) Of (D) (Instr. 3, | | | | ies cially Following | Form (D) or | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Code | v | Amount | (A) (D) | or Pr | Trans | | orted saction(s) r. 3 and 4) | | | Instr. 4) | | |
| Class A C | Common Sto | ock | | 01/12/ | 2/2024 | | | | A | | 7.01(1) | 1 | 4 \$ | 60 ⁽¹⁾ | 14,550.84 | | | D | |
| | | Tal | | | | | | | | | osed of, onvertib | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Dee Execution if any (Month/I | | 4. Transaction Code (Instr. 8) | | of Deriv Secu Acqu (A) o Dispo | erivative (Mo ecurities cquired) or sposed (D) str. 3, 4 | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) | | De Se (In | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Ownersh Form: Direct (D or Indirect (I) (Instr. | Ownership | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amour or Number of Shares | er | | | | | |

Explanation of Responses:

1. Represents restricted stock units of the Issuer's Class A Common Stock payable as a result of the payment of a cash dividend on the Issuer's Class A Common Stock. The restricted stock units are payable solely in shares of the Issuer's Class A Common Stock issued to the Reporting Person in respect of restricted stock units previously granted under the Issuer's 2019 Long-Term Stock Incentive Plan.

/s/ Avery Fischer, Attorney-in-Fact for Michael A. George

** 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.