FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

nington, D.C. 20549)		

	OIVIB A
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number
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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

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

1. Name and Address of Reporting Person* LAUREN RALPH (Last) (First) (Middle)					2. Issuer Name and Ticker or Trading Symbol RALPH LAUREN CORP [RL] 3. Date of Earliest Transaction (Month/Day/Year) 04/12/2024									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner X Officer (give title Other (specify below) Exec. Chair, Chief Creative					
RALPH LAUREN CORPORATION 650 MADISON AVE (Street) NEW YORK NY 10022				4. If <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Lir	Individual ne) X For For	dividual or Joint/Group Filing (Check Applicable)					
(City)	(8	itate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										nded to				
		Table	I - No	n-Deriva	tive S	Secui	rities	s Acq	uired,	, Dis	posed of	or E	Ben	efici	ally Ow	ned			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day			Execution Date,				s Acquired (A) or If (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)						
					Code	v	Amount	(A) or (D)		Price	Tran	Transaction(s) (Instr. 3 and 4)			(111541. 4)				
Class A Common Stock 04/12/20					024		A		2,353.21	(1) A :		\$ <mark>0</mark>	1) 89	897,467.53		D			
Class A Common Stock															35,854			By Trust ⁽²⁾	
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)	Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) Execution Date, if any				Transaction of Deriv Secu Acqu (A) on Dispo of (D		or losed () (r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		f	8. Price o Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	Code V (A) (D)		Date Exercis	e Expiration rcisable Date		Title	or Nur of	ount mber ares						

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 1997 Stock Incentive Plan.
- 2. These shares of Class A Common Stock are held by a revocable trust of which the reporting person is sole trustee and sole beneficiary.

/s/ Avery S. Fischer, Attorney-04/16/2024 in-Fact for Ralph Lauren

** 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.