FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGI	ES IN BEN	IEFICIAL (OWNERS	HIP

OMB APPR	OVAL
OMB Number:	3235-0287
Estimated average bu	rden
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

					0	0000	00(11)	or tile i	iivestiiiei	001	прапу Аст	0. 10-	10							
1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol RALPH LAUREN CORP [RL]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
LAUREN RALPH			1						[102]				X	Direc	ctor		X 10% C	wner		
,					-										X		er (give title			(specify
(Last)	(F	rst) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)							Λ	belov	,		below))		
RALPH	LAUREN (CORPORATION	ſ		01/	01/13/2012							Chairman & CEO							
650 MADISON AVE																				
030 MADISON AVE			4 1	4. If Amondment, Date of Original Filed (Month/Dou/Moss)							+	6. Individual or Joint/Group Filing (Check Applicable								
(0)			- 4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street) NEW YO	ORK N	V 1	10022												X	Form	n filed by On	e Re	porting Pers	on
INEW IC	JIXIX IV	1	10022													Form	n filed by Mo	re th	an One Rep	orting
					1											Pers	on		·	Ü
(City)	(S	tate) (Zip)																	
		Tabl	e I - Noi	n-Deriv	ative	Se	curitie	es Acc	quired,	Dis	posed o	f, or	r Bene	eficia	ally (Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,			Transaction Disposed Of (D) (Instr. 3, 4			4 and Securiti		ties Fo		6. Ownership Form: Direct	7. Nature of Indirect Beneficial					
			Dayiye					Code (Instr. 5) 8)					Benef Owne Repor		d Following ((D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
							Code	v	Amount		(A) or (D)	Price	.	Transaction(s) (Instr. 3 and 4)				(111311. 4)		
Class A Common Stock 01/13/					3/2012						673.6	73.69 A		(1	616,704.99		5,704.99		D	
		Ta	hle II - I	Derivat	ive S	eci	ırities	Δcau	ired D	isno	sed of,	or B	Renefi	ciall	v Ov	vned				
											onvertib				,	viica				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date Execution Date (Month/Day/Year) if any (Month/Day/Y			Date,	Transaction Code (Instr. 8)		n of Deriv Secu Acqu (A) o Disp of (D (Inst	ı of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3		ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nun of	ount nber res						

Explanation of Responses:

1. Represents restricted stock units 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 Long-Term Stock Incentive Plan.

/s/ Yen D. Chu, Attorney-in-

Fact

** Signature of Reporting Person Date

01/17/2012

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.