Edgar Filing: BENNACK FRANK A JR - Form 4

BENNACK F	FRANK A JR									
Form 4										
April 03, 201	8									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL	
CUNIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
	Check this box							Expires:	January 31,	
if no longe subject to	er STATEM	ENT OF CH	ANGES IN	BENEFI	NEFICIAL OWNERSHIP OF				2005	
Section 16	5.		SECUR	ITIES				Estimated average burden hours per		
Form 4 or								response 0.5		
Form 5	Filed purs	uant to Section	on 16(a) of th	e Securiti	es Ex	kchang	ge Act of 1934,			
obligation may conti			•	•	- ·		f 1935 or Sectio	n		
See Instru		30(h) of th	e Investment	Company	y Act	of 19	40			
1(b).										
(Drint - Tom - D										
(Print or Type R	esponses)									
1 Name and A	ddress of Reporting F	Person [*] o t		LT: -1	r	_	5 Relationship of	f Reporting Per	son(s) to	
BENNACK	ssuer Name and	Ticker or	i radin	g	5. Relationship of Reporting Person(s) to Issuer					
22101011		Syml R A I	LPH LAURE	NCORP	I T T					
					[KL]		(Chec	ck all applicable	e)	
			te of Earliest Tr	ransaction			V D' (100 O			
RALPH LAU	IDEN		nth/Day/Year)				X_ Director 10% Owner Officer (give title Other (specify			
	TION, 650 MADI		01/2018				below)	below)		
AVENUE	1011, 050 MADI	.501								
IT VERVEE	(Cture et)	4 10	• • • • •					·	(61)	
			If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
	Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person					
NEW YORK	. NY 10022						Form filed by M	More than One Ro		
11211 1011	.,						Person			
(City)	(State) (Zip)	Fable I - Non-E	Derivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction Date	A. Deemed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution Dat		ionAcquired			Securities	Form: Direct	Indirect	
(Instr. 3)		any (Month/Day/Y					•	(D) or Indirect (I)	Beneficial Ownership	
		(Monul/Day/1	ear) (msu. o)				Following	(Instr. 4)	(Instr. 4)	
							Reported	(
					(A) or		Transaction(s)			
			Code V	Amount		Price	(Instr. 3 and 4)			
Class A										
Common	04/01/2018		А	418	А	<u>(1)</u>	21,861	D		
Stock										

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
BENNACK FRANK A JR RALPH LAUREN CORPORATION 550 MADISON AVENUE NEW YORK, NY 10022	Х							
Signatures								
/s/ Avery Fischer, Attorney-in-Fact for Bennack, Jr.	()4/03/2018						
<u>**</u> Signature of Reporting Perso			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).

Represents shares of the Issuer's Class A Common Stock issued to the Reporting Person as restricted stock units granted under the Issuer's (1) Amended and Restated 2010 Long-Term Stock Incentive Plan. These restricted stock units will vest and become exercisable on April 1, 2019, subject to the Reporting Person's continued service on the vesting date.

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.