

EXTENDED TO FEBRUARY 18, 2020

## Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.  
Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

OMB No 1545-0052

2018

Open to Public Inspection

Form 990-PF

Department of the Treasury  
Internal Revenue Service

For calendar year 2018 or tax year beginning

APR 1, 2018

and ending

MAR 30, 2019

Name of foundation

THE RALPH LAUREN CORPORATE FOUNDATION  
C/O CBIZ MHM LLC

A Employer identification number

52-2316766

Number and street (or P.O. box number if mail is not delivered to street address)

1065 AVE OF AMERICAS

Room/suite

B Telephone number

973-447-6008

City or town, state or province, country, and ZIP or foreign postal code

NEW YORK, NY 10018

G Check all that apply:

☐

Initial return

☐

Initial return of a former public charity

☐

Final return

☐

Amended return

☐

Address change

☒

Name change

H Check type of organization

☒

Section 501(c)(3) exempt private foundation

☐

Section 4947(a)(1) nonexempt charitable trust

☐

Other taxable private foundation

I Fair market value of all assets at end of year

(from Part II, col. (c), line 16)

\$ 21,922,293.

J Accounting method.

☐ Cash☒ Accrual☐ Other (specify)

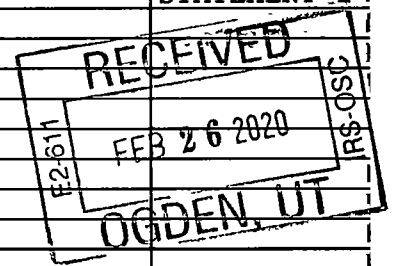
(Part I, column (d) must be on cash basis.)

C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

## Part I Analysis of Revenue and Expenses

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	2,698,954.		N/A	
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	389,237.	389,237.		STATEMENT 2
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	653,792.			STATEMENT 1
b Gross sales price for all assets on line 6a	4,066,958.			
7 Capital gain net income (from Part IV, line 2)		662,359.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss)				
11 Other income				
12 Total. Add lines 1 through 11	3,741,983.	1,051,596.		
13 Compensation of officers, directors, trustees, etc	0.	0.		0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees	18,779.	9,389.		9,390.
b Accounting fees	16,000.	8,000.		8,000.
c Other professional fees				
17 Interest				
18 Taxes				
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses	127,366.	117,591.		775.
24 Total operating and administrative expenses. Add lines 13 through 23	162,145.	134,980.		18,165.
25 Contributions, gifts, grants paid	3,075,467.			3,075,467.
26 Total expenses and disbursements. Add lines 24 and 25	3,237,612.	134,980.		3,093,632.
27 Subtract line 26 from line 12.	504,371.			
a Excess of revenue over expenses and disbursements				
b Net investment income (if negative, enter -0-)		916,616.		
c Adjusted net income (if negative, enter -0-)			N/A	



**THE RALPH LAUREN CORPORATE FOUNDATION**  
**C/O CBIZ MHM LLC**

Form 990-PF (2018)

52-2316766

Page 2

<b>Part II Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash - non-interest-bearing	4,719,333.	1,529,447.	1,529,447.
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock <b>STMT 6</b>	4,157,005.	3,899,827.	3,899,827.
	c Investments - corporate bonds			
	<b>Liabilities</b>	11 Investments - land, buildings, and equipment basis ▶		
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other <b>STMT 7</b>		10,841,884.	15,086,978.	15,086,978.
14 Land, buildings, and equipment basis ▶				
Less: accumulated depreciation ▶				
15 Other assets (describe ▶ <b>CONTRIBUTIONS RECEI</b> )		2,317,203.	1,406,041.	1,406,041.
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		22,035,425.	21,922,293.	21,922,293.
17 Accounts payable and accrued expenses			500.	
18 Grants payable				
<b>Net Assets or Fund Balances</b>	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ )			
23 Total liabilities (add lines 17 through 22)	0.	500.		
24 Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> <b>X</b>				
25 Unrestricted	7,140,551.	6,490,315.		
26 Temporarily restricted	14,894,874.	15,431,478.		
26 Permanently restricted				
27 Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/>				
27 Capital stock, trust principal, or current funds				
28 Paid-in or capital surplus, or land, bldg, and equipment fund				
29 Retained earnings, accumulated income, endowment, or other funds				
30 Total net assets or fund balances	22,035,425.	21,921,793.		
31 Total liabilities and net assets/fund balances	22,035,425.	21,922,293.		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	22,035,425.
2 Enter amount from Part I, line 27a	2	504,371.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	22,539,796.
5 Decreases not included in line 2 (itemize) ▶ <b>UNREALIZED GAIN/LOSS ON INVESTMENTS</b>	5	618,003.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	21,921,793.

Form 990-PF (2018)

823511 12-11-18

**THE RALPH LAUREN CORPORATE FOUNDATION**

Form 990-PF (2018)

**C/O CBIZ MHM LLC**

**52-2316766**

Page **3**

**Part IV Capital Gains and Losses for Tax on Investment Income**

**SEE ATTACHED STATEMENTS**

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>	<b>4,066,958.</b>	<b>3,404,599.</b>	<b>662,359.</b>

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			<b>662,359.</b>

<b>2</b> Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	<b>662,359.</b>
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	{ }	<b>3</b>	<b>N/A</b>

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year, see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2017	3,714,627.	18,292,738.	.203066
2016	3,969,209.	15,999,836.	.248078
2015	3,872,565.	15,974,702.	.242419
2014	5,238,399.	16,946,440.	.309115
2013	2,335,257.	15,108,207.	.154569

<b>2</b> Total of line 1, column (d)	<b>2</b>	<b>1.157247</b>
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	<b>.231449</b>
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	<b>4</b>	<b>19,801,909.</b>
<b>5</b> Multiply line 4 by line 3	<b>5</b>	<b>4,583,132.</b>
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	<b>9,166.</b>
<b>7</b> Add lines 5 and 6	<b>7</b>	<b>4,592,298.</b>
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	<b>3,093,632.</b>

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part IV** Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	THRU MS #622-XXX352-195-SCH.#1	P		
b	THRU MS #622-XXX353-195-SCH.#2	P		
c	THRU MS #622-XXX353-195-SCH.#2	P		
d	THRU MS #622-XXX355-195-SCH.#3	P		
e	THRU MS #622-XXX355-195-SCH.#3	P		
f	THRU MS #622-XXX345-195-SCH.#4	P		
g	THRU MS #622-XXX345-195-SCH.#4	P		
h	THRU MS #622-XXX347-195-SCH.#5	P		
i	THRU MS #622-XXX347-195-SCH.#5	P		
j	THRU MS #622-XXX365-195-SCH.#6	P		
k	THRU MS #622-XXX360-195-SCH.#7	P		
l	THRU MS #622-XXX360-195-SCH.#7	P		
m	THRU MS #622-XXX362-195-SCH.#8	P		
n	THRU MS #622-XXX362-195-SCH.#8	P		
o	THRU MS #622-XXX363-195-SCH.#9	P		

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	155,000.	147,760.	7,240.
b	12,793.	14,997.	<2,204.>
c	38,414.	25,820.	12,594.
d	29,544.	30,921.	<1,377.>
e	87,341.	67,343.	19,998.
f	82,402.	96,461.	<14,059.>
g	73,025.	49,713.	23,312.
h	71,598.	74,261.	<2,663.>
i	200,180.	157,130.	43,050.
j	38,000.	35,187.	2,813.
k	939.	750.	189.
l	18,942.	14,331.	4,611.
m	70,531.	71,144.	<613.>
n	597,124.	512,211.	84,913.
o	198,458.	227,602.	<29,144.>

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			7,240.
b			<2,204.>
c			12,594.
d			<1,377.>
e			19,998.
f			<14,059.>
g			23,312.
h			<2,663.>
i			43,050.
j			2,813.
k			189.
l			4,611.
m			<613.>
n			84,913.
o			<29,144.>

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	

**Part IV** Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	THRU MS #622-XXX363-195-SCH.#9	P		
b	THRU MS #622-XXX364-195-SCH.#10	P		
c	THRU MS #622-XXX364-195-SCH.#10	P		
d	CAPITAL GAINS DIVIDENDS			
e				
f				
g				
h				
i				
j				
k				
l				
m				
n				
o				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 460,671.		318,064.	142,607.
b 702,909.		707,364.	<4,455.>
c 941,254.		853,540.	87,714.
d 287,833.			287,833.
e			
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			142,607.
b			<4,455.>
c			87,714.
d			287,833.
e			
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	662,359.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	N/A

## THE RALPH LAUREN CORPORATE FOUNDATION

C/O CBIZ MHM LLC

52-2316766

Page 4

Form 990-PF (2018)

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1 18,332.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2 0.
3 Add lines 1 and 2		3 18,332.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4 0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5 18,332.
6 Credits/Payments		
a 2018 estimated tax payments and 2017 overpayment credited to 2018	6a 13,112.	
b Exempt foreign organizations - tax withheld at source	6b 0.	
c Tax paid with application for extension of time to file (Form 8868)	6c 0.	
d Backup withholding erroneously withheld	6d 0.	
7 Total credits and payments. Add lines 6a through 6d	7 13,112.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8 252.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9 5,472.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11 Enter the amount of line 10 to be Credited to 2019 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions <input type="checkbox"/> <u>NY</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

Form 990-PF (2018)

**THE RALPH LAUREN CORPORATE FOUNDATION**

Form 990-PF (2018)

**C/O CBIZ MHM LLC**

52-2316766

Page 5

**Part VII-A Statements Regarding Activities** (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>N/A</b>	13	X
14 The books are in care of <b>JOHN D'AMBROSIO C/O RALPH LAUREN CO</b> Telephone no <b>973-447-6008</b> Located at <b>100 METRO BLVD., NUTLEY, NJ</b> ZIP+4 <b>07110</b>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year	15	N/A
16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country	16	X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

	Yes	No
1a During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here <b>N/A</b>	1b	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) <b>N/A</b>	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. _____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018.) <b>N/A</b>	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b	X

Form 990-PF (2018)

## THE RALPH LAUREN CORPORATE FOUNDATION

Form 990-PF (2018)

C/O CBIZ MHM LLC

52-2316766

Page 6

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions

N/A

Organizations relying on a current notice regarding disaster assistance, check here

☒

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

6b

X

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?

☐ Yes ☒ No**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 9		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

0

Form 990-PF (2018)



## THE RALPH LAUREN CORPORATE FOUNDATION

Form 990-PF (2018)

C/O CBIZ MHM LLC

52-2316766

Page 7

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

**Part IX-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

1	N/A	
2		
3		
4		

**Part IX-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

1	N/A	
2		
3	All other program-related investments. See instructions.	

Total. Add lines 1 through 3

0.

Form 990-PF (2018)

**THE RALPH LAUREN CORPORATE FOUNDATION**  
**C/O CBIZ MHM LLC**

Form 990-PF (2018)

52-2316766 Page 8

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	17,366,267.
b	Average of monthly cash balances	1b	2,737,194.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	20,103,461.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	20,103,461.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	301,552.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	19,801,909.
6	Minimum investment return. Enter 5% of line 5	6	990,095.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	990,095.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	18,332.
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	18,332.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	971,763.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	971,763.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	971,763.

**Part XII Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	3,093,632.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	3,093,632.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,093,632.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2018)

**THE RALPH LAUREN CORPORATE FOUNDATION**  
**C/O CBIZ MHM LLC**

Form 990-PF (2018)

52-2316766 Page 9

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				971,763.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2018				
a From 2013	1,591,340.			
b From 2014	4,413,759.			
c From 2015	3,088,222.			
d From 2016	3,183,964.			
e From 2017	2,810,762.			
f Total of lines 3a through e	15,088,047.			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$	3,093,632.			
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2018 distributable amount				971,763.
e Remaining amount distributed out of corpus	2,121,869.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	17,209,916.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instructions			0.	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7	1,591,340.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	15,618,576.			
10 Analysis of line 9.				
a Excess from 2014	4,413,759.			
b Excess from 2015	3,088,222.			
c Excess from 2016	3,183,964.			
d Excess from 2017	2,810,762.			
e Excess from 2018	2,121,869.			

C/O CBIZ MHM LLC

Form 990-PF (2018)

52-2316766

Page 10 ✓

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

N/A

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

☐ 4942(j)(3) or ☐ 4942(j)(5)

**2 a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

**b 85% of line 2a**

**c** Qualifying distributions from Part XII,  
line 4 for each year listed

**d** Amounts included in line 2c not used directly for active conduct of exempt activities

**e** Qualifying distributions made directly for active conduct of exempt activities.

Subtract line 2d from line 2c

**3** Complete 3a, b, or c for the alternative test relied upon:

a "Assets" alternative test - enter

(1) Value of all assets

**(2) Value of assets qualifying under section 4942(j)(3)(B)(i)**

**b** "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed

c "Support" alternative test - enter.

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)

(3) Largest amount of support from an exempt organization

4) Gross investment income

**Part XV** **Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

### 1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**NONE**

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a. The name, address, and telephone number or email address of the person to whom applications should be addressed

**b The form in which applications should be submitted and information and materials they should include:**

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

## THE RALPH LAUREN CORPORATE FOUNDATION

Form 990-PF (2018)

C/O CBIZ MHM LLC

52-2316766 Page 11

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
RL CENTER FOR CANCER CARE PREVENTION (RLCCCP) 1919 MADISON AVENUE NEW YORK, NY 10035	NONE	EXEMPT ORGANIZATION	CHARITY	1,810,000.
SCHOLARSHIP AMERICA 1550 AMERICAN BLVD, STE #155 MINNEAPOLIS, MN 55425	NONE	EXEMPT ORGANIZATION	CHARITY	130,276.
HETRICK-MARTIN INSTITUTE 2 ASTOR PLACE NEW YORK, NY 10003	NONE	EXEMPT ORGANIZATION	CHARITY	85,000.
MEMORIAL SLOAN KETTERING CANCER CENTER 163 WEST 125TH STREET NEW YORK, NY 10027	NONE	EXEMPT ORGANIZATION	CHARITY	75,000.
THE NINA HYDE CENTER OF GEORGETOWN LOMBARDI CANCER CENTER 3800 RESERVOIR ROAD NW WASHINGTON, DC 20057	NONE	EXEMPT ORGANIZATION	CHARITY	50,000.
Total			SEE CONTINUATION SHEET(S) ▶ 3a	3,075,467.
b Approved for future payment				
NONE				
Total			▶ 3b	0.

Form 990-PF (2018)

THE RALPH LAUREN CORPORATE FOUNDATION  
C/O CBIZ MHM LLC

52-2316766

**Part XV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
THE HAROLD P. FREEMAN PATIENT NAVIGATION INSTITUTE 55 EXCHANGE PL #405 NEW YORK, NY 10005	NONE	EXEMPT ORGANIZATION	CHARITY	50,000.
THE MOSES H. CONE MEMORIAL HOSPITAL 1200 N ELM ST GREENSBORO, NC 27401	NONE	EXEMPT ORGANIZATION	CHARITY	50,000.
THE EAST HARLEM SCHOOL 309 103RD STREET NEW YORK, NY 10029	NONE	EXEMPT ORGANIZATION	CHARITY	40,000.
FREE ARTS ABUSED CHILDREN NYC 1431 BROADWAY NEW YORK, NY 10010	NONE	EXEMPT ORGANIZATION	CHARITY	36,000.
GOD'S LOVE WE DELIVER 630 FLUSHING AVENUE BROOKLYN, NY 11206	NONE	EXEMPT ORGANIZATION	CHARITY	35,000.
HABITAT FOR HUMANITY 111 JOHN STREET, 23RD FLOOR NEW YORK, NY 10038	NONE	EXEMPT ORGANIZATION	CHARITY	35,000.
BREAST CANCER RESEARCH FOUNDATION 60 EAST 56TH STREET, 8TH FLOOR NEW YORK, NY 10022	NONE	EXEMPT ORGANIZATION	CHARITY	35,000.
ST. FRANCIS FOOD PANTRY 450 SEVENTH AVENUE NEW YORK, NY 10123	NONE	EXEMPT ORGANIZATION	CHARITY	31,491.
ROOM TO GROW 54 WEST 21ST STREET NEW YORK, NY 10010	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
RIVERKEEPER 20 SECOND ROAD OSSINING, NY 10562	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
Total from continuation sheets				925,191.

823631  
04-01-18

THE RALPH LAUREN CORPORATE FOUNDATION  
C/O CBIZ MHM LLC

52-2316766

**Part XV** Supplementary Information

**3** Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PROJECT SUNSHINE 108 WEST 39TH STREET #725 NEW YORK, NY 10018	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
MICHAEL J FOX FOUNDATION P.O.BOX 5014 HAGERSTOWN, MD 21741	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
LOS ANGELES COUNTY USC MEDICAL CENTER AUXILIARY 1200 N STATE ST RM 1900 LOS ANGELES, CA 90033	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
HANDS IN 4 YOUTH 256 MACOPIN RD WEST MILFORD, NJ 07480	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
BOSTON MEDICAL CENTER ONE BOSTON MEDICAL CENTER PL BOSTON, MA 02118	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
UNIVERSITY OF CHICAGO CANCER RESEARCH FOUNDATION 5841 S. MARYLAND CHICAGO, IL 60637	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
DUBIN BREAST CANCER 1176 5TH AVE NEW YORK, NY 10029	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
AMFAR 120 WALL STREET NEW YORK, NY 10005	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
ELTON JOHN AIDS FOUNDATION 584 BROADWAY, STE 906 NEW YORK, NY 10012	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
ALIGHT, INC. 130 BATTERY STREET SAN FRANCISCO, CA 94111	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
Total from continuation sheets				

THE RALPH LAUREN CORPORATE FOUNDATION  
C/O CBIZ MHM LLC

52-2316766

**Part XV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
AVERA MCKENNAN, WALKING FORWARD 3900 W AVERA DRIVE SIOUX FALLS, SD 57108	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
CITY PARKS FOUNDATION 830 FIFTH AVENUE NEW YORK, NY 10065	NONE	EXEMPT ORGANIZATION	CHARITY	20,000.
COMMUNITY FOOD BANK OF NEW JERSEY 31 EVANS TERMINAL HILLSIDE, NJ 07205	NONE	EXEMPT ORGANIZATION	CHARITY	20,000.
CITY HARVEST 6 E. 32ND STREET NEW YORK, NY 10016	NONE	EXEMPT ORGANIZATION	CHARITY	20,000.
NEW YORK PRESBYTERIAN FUND INC. 525 EAST 68TH STREET BOX 123 NEW YORK, NY 10065	NONE	EXEMPT ORGANIZATION	CHARITY	15,000.
NY COMMON PANTRY 8 EAST 109TH STREET NEW YORK, NY 10029	NONE	EXEMPT ORGANIZATION	CHARITY	15,000.
AIDS WALK NYC 119 WEST 24TH STREET NEW YORK, NY 10011	NONE	EXEMPT ORGANIZATION	CHARITY	15,000.
OVARIAN CANCER RESEARCH FOUNDATION 14 PENNSYLVANIA PLAZA #1710 NEW YORK, NY 10122	NONE	EXEMPT ORGANIZATION	CHARITY	10,000.
MOVEMBER FOUNDATION P.O. BOX 1595 CULVER CITY, CA 90232	NONE	EXEMPT ORGANIZATION	CHARITY	10,000.
CHILDREN'S CANCER AND BLOOD FOUNDATION 466 LEXINGTON AVE 16TH FLOOR NEW YORK, NY 10017	NONE	EXEMPT ORGANIZATION	CHARITY	10,000.
Total from continuation sheets				



THE RALPH LAUREN CORPORATE FOUNDATION  
C/O CBIZ MHM LLC

52-2316766

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ELLEN HERMANSON FOUNDATION 200 WEST END AVENUE, SUITE 12G NEW YORK, NY 10023	NONE	EXEMPT ORGANIZATION	CHARITY	10,000.
RONALD MCDONALD HOUSE OF NEW YORK, INC. 405 EAST 73RD STREET NEW YORK, NY 10021	NONE	EXEMPT ORGANIZATION	CHARITY	10,000.
THE FRESH AIR FUND 633 THIRD AVENUE, 14TH FLOOR NEW YORK, NY 10017	NONE	EXEMPT ORGANIZATION	CHARITY	10,000.
LEUKEMIA AND LYMPHOMA SOCIETY 475 PARK AVENUE SOUTH NEW YORK, NY 10016	NONE	EXEMPT ORGANIZATION	CHARITY	10,000.
HUDSON RIVER PARK FRIENDS 305 7TH AVE #12TH NEW YORK, NY 10001	NONE	EXEMPT ORGANIZATION	CHARITY	10,000.
THE LGBT COMMUNITY CENTER 208 W 13TH ST NEW YORK, NY 10011	NONE	EXEMPT ORGANIZATION	CHARITY	10,000.
THE NEW YORK ACADEMY OF MEDICINE 1216 FIFTH AVENUE NEW YORK, NY 10029	NONE	EXEMPT ORGANIZATION	CHARITY	10,000.
THE NEW YORK CITY AIDS MEMORIAL 76 GREENWICH AVE NEW YORK, NY 10011	NONE	EXEMPT ORGANIZATION	CHARITY	10,000.
ONLY MAKE BELIEVE 121 WEST 27TH STREET NEW YORK, NY 10001	NONE	EXEMPT ORGANIZATION	CHARITY	9,750.
ANIMAL HAVEN 200 CENTRE STREET NEW YORK, NY 10013	NONE	EXEMPT ORGANIZATION	CHARITY	9,000.
Total from continuation sheets				

823631  
04-01-18

THE RALPH LAUREN CORPORATE FOUNDATION  
C/O CBIZ MHM LLC

52-2316766

**Part XV** **Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CITIZENS COMMITTEE FOR NYC 77 WATER STREET NEW YORK, NY 10005	NONE	EXEMPT ORGANIZATION	CHARITY	7,500.
DREAM YARD PROJECT 1085 WASHINGTON AVE BRONX, NY 10456	NONE	EXEMPT ORGANIZATION	CHARITY	7,450.
AMERICAN CANCER SOCIETY 250 WILIAMS ST ATLANTA, GA 30303	NONE	EXEMPT ORGANIZATION	CHARITY	6,000.
TRINITAS HEALTH FOUNDATION 225 WILLIAMSON ST ELIZABETH, NJ 07202	NONE	EXEMPT ORGANIZATION	CHARITY	5,000.
HACKENSACK RIVERKEEPER, INC. 231 MAIN ST. HACKENSACK, NJ 07601	NONE	EXEMPT ORGANIZATION	CHARITY	3,000.
THE NATIONAL CONSORTIUM OF BREAST CENTERS PO BOX 1334 WARSAW, IN 46581	NONE	EXEMPT ORGANIZATION	CHARITY	25,000.
Total from continuation sheets				

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount			
1 Program service revenue.						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities		14	389,237.			
5 Net rental income or (loss) from real estate						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory		18	653,792.			
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue.						
a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal. Add columns (b), (d), and (e)		0.	1,043,029.		0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	1,043,029.	

(See worksheet in line 13 instructions to verify calculations )

## **Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

[illegible]

**Part XVII** Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- |   |  | Yes | No |
|---|--|-----|----|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?   |     |    |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of:   |     |    |
|   | (1) Cash   |     | X  |
|   | (2) Other assets   |     | X  |
| b | Other transactions:  |     |    |
|   | (1) Sales of assets to a noncharitable exempt organization   |     | X  |
|   | (2) Purchases of assets from a noncharitable exempt organization   |     | X  |
|   | (3) Rental of facilities, equipment, or other assets   |     | X  |
|   | (4) Reimbursement arrangements   |     | X  |
|   | (5) Loans or loan guarantees   |     | X  |
|   | (6) Performance of services or membership or fundraising solicitations   |     | X  |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees   |     | X  |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. |     |    |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

[illegible]

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

102/06/2020  
Date

**TREASURER**

May the IRS discuss this return with the preparer shown below? See Instr.

☒ Yes ☐ No

**Paid**  
**Preparer**  
**Use Only**

Print/Type preparer's name

Preparer's signature \_\_\_\_\_

Date \_\_\_\_\_

Check ☐ self-employed

PTIN

KENNETH R. NOLAN

Kenneth R. Wilson

61/29/3000

**LP01256016**

Firm's name ▶ CBIZ MHM, LLC

Firm's EIN ► 34-1883473

Firm's address ► 1065 AVENUE OF THE AMERICAS  
NEW YORK, NY 10018

Phone no. 212-790-5700

Form 990-PF (2018)

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2018**

Name of the organization

THE RALPH LAUREN CORPORATE FOUNDATION  
C/O CBIZ MHM LLC

Employer identification number

52-2316766

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization <b>THE RALPH LAUREN CORPORATE FOUNDATION</b> <b>C/O CBIZ MHM LLC</b>	Employer identification number <b>52-2316766</b>
---	---

**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RALPH LAUREN CORPORATION 650 MADISON AVENUE NEW YORK, , NY 10022	\$ 1,588,703.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	MACY'S/BLOOMINGDALE'S 2101 E. KEMPER ROAD SHARONVILLE, OH 45241	\$ 1,003,116.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

THE RALPH LAUREN CORPORATE FOUNDATION  
C/O CBIZ MHM LLC

Employer identification number

52-2316766

**Part II** **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

THE RALPH LAUREN CORPORATE FOUNDATION  
C/O CBIZ MHM LLC

Employer identification number

52-2316766

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) ▶ \$

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee



## FORM 990-PF

## GAIN OR (LOSS) FROM SALE OF ASSETS

## STATEMENT 1

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED DEPREC.	(F) DATE ACQUIRED GAIN OR LOSS	DATE SOLD
THRU MS #622-XXX352-195-SCH.#1				PURCHASED		
	155,000.	148,398.	0.	0.	6,602.	

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED DEPREC.	(F) DATE ACQUIRED GAIN OR LOSS	DATE SOLD
THRU MS #622-XXX353-195-SCH.#2				PURCHASED		
	12,793.	15,259.	0.	0.	<2,466.>	

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED DEPREC.	(F) DATE ACQUIRED GAIN OR LOSS	DATE SOLD
THRU MS #622-XXX353-195-SCH.#2				PURCHASED		
	38,414.	25,850.	0.	0.	12,564.	

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED DEPREC.	(F) DATE ACQUIRED GAIN OR LOSS	DATE SOLD
THRU MS #622-XXX355-195-SCH.#3				PURCHASED		
	29,544.	30,921.	0.	0.	<1,377.>	

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	MANNER ACQUIRED PURCHASED	DATE ACQUIRED	DATE SOLD
THRU MS #622-XXX355-195-SCH.#3	87,341.	67,343.	0.			
				(E) DEPREC.	(F) GAIN OR LOSS	
						19,998.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	MANNER ACQUIRED PURCHASED	DATE ACQUIRED	DATE SOLD
THRU MS #622-XXX345-195-SCH.#4	82,402.	98,284.	0.			
				(E) DEPREC.	(F) GAIN OR LOSS	
						<15,882.>

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	MANNER ACQUIRED PURCHASED	DATE ACQUIRED	DATE SOLD
THRU MS #622-XXX345-195-SCH.#4	73,025.	49,770.	0.			
				(E) DEPREC.	(F) GAIN OR LOSS	
						23,255.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	MANNER ACQUIRED PURCHASED	DATE ACQUIRED	DATE SOLD
THRU MS #622-XXX347-195-SCH.#5	71,598.	74,261.	0.			
				(E) DEPREC.	(F) GAIN OR LOSS	
						<2,663.>

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	MANNER ACQUIRED PURCHASED	DATE ACQUIRED	DATE SOLD
THRU MS #622-XXX347-195-SCH.#5	200,180.	157,130.	0.			
				(E) DEPREC.	(F) GAIN OR LOSS	
						43,050.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	MANNER ACQUIRED PURCHASED	(E) DEPREC.	DATE ACQUIRED	(F) GAIN OR LOSS DATE SOLD
THRU MS #622-XXX365-195-SCH.#6	38,000.	35,198.	0.		0.		2,802.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	MANNER ACQUIRED PURCHASED	(E) DEPREC.	DATE ACQUIRED	(F) GAIN OR LOSS DATE SOLD
THRU MS #622-XXX360-195-SCH.#7	939.	750.	0.		0.		189.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	MANNER ACQUIRED PURCHASED	(E) DEPREC.	DATE ACQUIRED	(F) GAIN OR LOSS DATE SOLD
THRU MS #622-XXX360-195-SCH.#7	18,942.	14,331.	0.		0.		4,611.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	MANNER ACQUIRED PURCHASED	(E) DEPREC.	DATE ACQUIRED	(F) GAIN OR LOSS DATE SOLD
THRU MS #622-XXX362-195-SCH.#8	70,531.	71,144.	0.		0.		<613.>

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	MANNER ACQUIRED PURCHASED	(E) DEPREC.	DATE ACQUIRED	(F) GAIN OR LOSS DATE SOLD
THRU MS #622-XXX362-195-SCH.#8	597,124.	512,703.	0.		0.		84,421.

(A) DESCRIPTION OF PROPERTY	(B)		(C)	(D)	(E)	(F)
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC.	GAIN OR LOSS	
THRU MS #622-XXX363-195-SCH.#9	198,458.	232,310.	0.	0.	<33,852.>	

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
THRU MS #622-XXX363-195-SCH.#9	PURCHASED		
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.
(F) GAIN OR LOSS			
460,671.	318,610.	0.	0.
			142,061.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
THRU MS #622-XXX364-195-SCH.#10	702,909.	707,364.	0.	0.	<4,455.>

(A) DESCRIPTION OF PROPERTY	(B)		(C)	(D)	(E)	(F)
	GROSS	COST OR	EXPENSE OF	DEPREC.	GAIN OR LOSS	
	SALES PRICE	OTHER BASIS	SALE			
THRU MS #622-XXX364-195-SCH.#10						
	941,254.	853,540.	0.	0.		87,714.

CAPITAL GAINS DIVIDENDS FROM PART IV

287,833.

TOTAL TO FORM 990-PF, PART I, LINE 6A

653,792.

## FORM 990-PF

## DIVIDENDS AND INTEREST FROM SECURITIES

## STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
THRU MORGAN STANLEY-CAPITAL GAIN DISTRIBUTIONS	287,833.	287,833.	0.	0.	
THRU MORGAN STANLEY-DIVIDENDS	371,817.	0.	371,817.	371,817.	
THRU MORGAN STANLEY-INTEREST	17,420.	0.	17,420.	17,420.	
TO PART I, LINE 4	677,070.	287,833.	389,237.	389,237.	

## FORM 990-PF

## LEGAL FEES

## STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	18,779.	9,389.		9,390.
TO FM 990-PF, PG 1, LN 16A	18,779.	9,389.		9,390.

## FORM 990-PF

## ACCOUNTING FEES

## STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CBIZ MHM	16,000.	8,000.		8,000.
TO FORM 990-PF, PG 1, LN 16B	16,000.	8,000.		8,000.

FORM 990-PF	OTHER EXPENSES		STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	117,591.	117,591.		0.
STATE FILING FEES	775.	0.		775.
2018 ESTIMATED TAXES	9,000.	0.		0.
TO FORM 990-PF, PG 1, LN 23	127,366.	117,591.		775.

FORM 990-PF	CORPORATE STOCK		STATEMENT 6	
DESCRIPTION	BOOK VALUE		FAIR MARKET VALUE	
SEE STATEMENT A ATTACHED	3,899,827.		3,899,827.	
TOTAL TO FORM 990-PF, PART II, LINE 10B	3,899,827.		3,899,827.	

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 7	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
SEE STATEMENT A ATTACHED	FMV	15,086,978.	15,086,978.	
TOTAL TO FORM 990-PF, PART II, LINE 13		15,086,978.	15,086,978.	

FORM 990-PF	OTHER ASSETS		STATEMENT 8	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE	
CONTRIBUTIONS RECEIVABLE	2,317,203.	1,406,041.	1,406,041.	
TO FORM 990-PF, PART II, LINE 15	2,317,203.	1,406,041.	1,406,041.	

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS  
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 9

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
RALPH LAUREN C/O POLO RALPH LAUREN FDN NEW YORK, NY 10022	CHAIRMAN OF THE BOARD/DIRE 0.50	0.	0.	0.
DAVID LAUREN C/O POLO RALPH LAUREN FDN NEW YORK, NY 10022	PRESIDENT/DIRECTOR 0.50	0.	0.	0.
DAVID COYLE C/O POLO RALPH LAUREN FDN NEW YORK, NY 10022	DIRECTOR 0.50	0.	0.	0.
ROB ALEXANDER C/O POLO RALPH LAUREN FDN NEW YORK, NY 10022	TREASURER 0.50	0.	0.	0.
CRAIG SMITH C/O POLO RALPH LAUREN FDN NEW YORK, NY 10022	DIRECTOR 0.50	0.	0.	0.
BETTE-ANN GWATHMEY C/O POLO RALPH LAUREN FDN NEW YORK, NY 10022	OFFICER 0.50	0.	0.	0.
AVERY S. FISCHER C/O POLO RALPH LAUREN FDN NEW YORK, NY 10022	SECRETARY 0.50	0.	0.	0.
ARNOLD COHEN C/O POLO RALPH LAUREN FDN NEW YORK, NY 10022	DIRECTOR 0.50	0.	0.	0.
ANDREEA STAN C/O POLO RALPH LAUREN FDN NEW YORK, NY 10022	ASSISTANT SECRETARY 0.50	0.	0.	0.
JOHN D'AMBROSIO C/O POLO RALPH LAUREN FDN NEW YORK, NY 10022	ASSISTANT TREASURER 0.50	0.	0.	0.

52-2316766

0.                      0.                      0.

0.                      0.                      0.