## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [	D.C.	20549
---------------	------	-------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Instruc	tion 1(b).			File									nge Act of	1934						
					or	Section	on 30(h	) of the	e Inve	stment	Comp	pany Act	t of 1940							
Name and Address of Reporting Person*     Menezes Ivan					2. Issuer Name <b>and</b> Ticker or Trading Symbol COACH INC [ COH ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Wieliezes Ivali</u>														X	Direct	or		10% O	wner	
(Last) (First) (Middle) 516 WEST 34TH STREET					3. Date of Earliest Transaction (Month/Day/Year) 07/01/2013										Office below	r (give title )	Other (specify below)			
-					4. 11	f Ame	ndmen	t, Date	of Or	riginal F	iled (	(Month/D	ay/Year)			dual or	Joint/Group	o Filin	ıg (Check Ap	plicable
(Street) NEW YO	ORK N	<b>Y</b> :	10001												ine) X	Form	filed by One	e Rep	oorting Perso	on
															Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																	
		Tab	le I - Nor	-Deriv	ative	Se	curiti	es A	cqui	red, D	isp	osed	of, or Be	enefici	ially (	Owne	d			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execut (ay/Year) if any		. Deemed ecution Date, any onth/Day/Year)		Transaction Dispose Code (Instr. 5)			rities Acqui ed Of (D) (In		4 and Securi Benefi Owned		ies F cially (I Following (I		n: Direct	7. Nature of Indirect Beneficial Ownership		
										Code	/	Amount (A) or (D)		Pric	. I	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
		Т	able II - I (										, or Ben ble sec			vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)				6. Date Exercisal Expiration Date (Month/Day/Year)				Amount o Securities Underlyin Derivative	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		rice of vative urity tr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exer	rcisable	Exp Dat	piration te	Title	Amoun or Numbe of Shares	r					

## **Explanation of Responses:**

(2)

(2)

Deferred

Unit<sup>(1)</sup> Restricted

Stock Unit<sup>(1)</sup>

1. These securities were received through a dividend paid on the transaction date.

07/01/2013

07/01/2013

- 2. These securities will convert on a 1-for-1 basis into shares of the issuer's common stock.
- 3. These securities were issued pursuant to the Issuer's Deferred Compensation Plan (for outside directors). The Issuer has agreed to represent the amount of the reporting person's account balance with deferred stock units which represent the right to receive common stock of the Issuer on a one-for-one basis on the distribution date elected by the reporting person.

(5)

- 4. These securities do not expire.
- 5. These securities vest in part on each of the vesting dates of the original RSU grants.

Daniel J. Ross, Assistant Secretary, pursuant to a power of attorney filed with the

40

8

\$57.02

\$57.32

07/02/2013

6,867.48

1,340

D

D

Commission

Common

Stock

Common

Stock

(4)

\*\* 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).

Α

40

8

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.