FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| 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

| Name and Address of Reporting Person* Menezes Ivan | | | | | | 2. Issuer Name and Ticker or Trading Symbol TAPESTRY, INC. [TPR] | | | | | | | | | k all appli Directo | cable) | 10% Owner | | vner | |
|--|--|--|---|---------|--------------------------|---|---|--------|---------------------------------------|------|--|---|----------------------------------|--------|---|--|-------------------------|--|---|--|
| (Last) | (Fi SON YARI | , | Middle) | | 11/ | 3. Date of Earliest Transaction (Month/Day/Year) 11/05/2020 | | | | | | | | | below) | | Other (specif below) | | | |
| (Street) NEW YO | | | 10001 Zip) | | _ 4. li | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tab | le I - Noi | n-Deriv | vative | Sec | uritie | s Ac | quired, | Dis | posed c | of, or Bo | enefic | cially | Owned | t | | | | |
| ··························· D | | | | Date | Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Code (Instr. 5 | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | 5. Amou Securitie Benefici Owned | es Forr ially (D) of Following (I) (II | | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | Code | v | Amount | ount (A) or Pi | | ice | Transac | ransaction(s) Instr. 3 and 4) | | | (11150.4) | | | | |
| Common Stock ⁽¹⁾ | | | | 11/0: | 5/2020 | /2020 | | | | | 3,035 | 5 A | \$2 | 24.71 | 25 | ,344 | | D | | |
| Common Stock | | | | | | | | | | | | | | | 26 | 26,937 | | | By Spouse | |
| | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/ | Date, | ate, Transact | | | | 6. Date Ex Expiration (Month/Da | Date | | 7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4) | | S | . Price of Derivative Security Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code | v | (A) | | Date Exercisab | | xpiration ate | Title | Amo or Num of Shar | ber | | | | | | |
| Stock Option ⁽²⁾ | \$24.71 | 11/05/2020 | | | A | | 7,282 | | 11/05/202 | 1 1 | 1/05/2030 | Common Stock | 7,2 | 82 | \$0.0000 | 7,282 | | D | | |

Explanation of Responses:

- 1. All of the securities acquired were received in the form of unvested restricted stock units issued under the Issuer's Stock Incentive Plan. These securities will vest on November 5, 2021.
- 2. All of the securities acquired were issued under the Issuer's Stock Incentive Plan.

/s/ Emily S. Zahler, Assistant Corporate Secretary, pursuant to a power of attorney filed with the Commission

11/06/2020

** Signature of Reporting Person Date

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

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.

^{*} 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).