FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF | CHANGE |
|------------|----|--------|
| SIAILMLINI | O. | CHANGE |

ES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* FRANKFORT LEW | | | | | 2. Issuer Name and Ticker or Trading Symbol COACH INC [COH] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|--|--|--------------------------------------|--|--------------|---|--------------|--|--|---|-------------------|--|--------------------|---|---|---|-----|--|---------------------------------------|--|
| | | | | ا | <u> </u> | | <u></u> [| 3011 | | | | | X | Direct | or | | 10% Ov | vner | |
| (Last) | (F | irst) (| (Middle) | | Date of Earliest Transaction (Month/Day/Year) | | | | | | | \dashv | X | Office below | r (give title) | | Other (s | specify | |
| 516 WEST 34TH STREET | | | | 10 | 10/01/2014 | | | | | | | Executive Chairman | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| (Street) | | | | 4. 1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| NEW YO | ORK N | Y | 10001 | | | | | | | | | X | | orm filed by One Reporting Person | | | | | |
| (City) | (S | tate) (| (Zip) | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac | | | | | Execution Date, | | | 3. Transact | Transaction Disposed Of (D) (Instr. Code (Instr. 5) | | | red (A) o | r | 5. Amou Securiti | ties Form cially (D) (Following (I) (I ed | | | 7. Nature of Indirect | |
| (Month/Da | | | | | | | | Code (In | | | | 511.0, 4 | | Benefic | | | or Indirect Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | (World // Day/ Teal) | | | · · | | (A) or | | or . | Report | | | | | | |
| | | | | | | | Code | / A | Amount | ınt (A) or (D) | | e | (Instr. 3 | . 3 and 4) | | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| | | la = | | - | Cans | . | | | | | 1 | | _ | | | . 1 | | | |
| 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 | Code (| Transaction Code (Instr. | | rative rities rited rosed) 7. 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | e and | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | | | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | | | | Amour or | | | | | | | |
| | | | | 0.4 | , | ,,, | | Date | | ration | T:41- | Numbe of | | | | | | | |
| | | | | Code | V | (A) | (D) | Exercisable | Date | | Title | Shares | _ | | | _ | | | |
| Restricted Stock Unit ⁽¹⁾ | (2) | 10/01/2014 | | A | | 142 | | (3) | (4 | (4) | Common Stock | 142 | \$ | 36.08 | 13,935 | | D | | |

Explanation of Responses:

- 1. These securities were received through a dividend paid on the transaction date.
- 2. These securities will convert on a 1-for-1 basis into shares of the issuer's common stock.
- 3. These securities vest in part on each of the vesting dates of the original RSU grants.
- 4. These securities do not expire.

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

10/01/2014

** 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).

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.