П

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this bo	x if no longer subject to
Section 16. Fo	orm 4 or Form 5
obligations ma	ay continue. See
Instruction 1(b	o).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

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	hours per response:	0.5
I	Estimated average burden	

1. Name and Address of Reporting Person* <u>MILLER IRENE R</u>					2. Issuer Name and Ticker or Trading Symbol <u>COACH INC</u> [COH]									5. Relationship of Reporting Person(s) to Iss (Check all applicable) X Director 10% Ow					
														tor		10% O			
(Last) 516 WES	(F ST 34TH S	irst) TREET	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 10/01/2012								Office belov	er (give title /)		Other (below)	specify		
,					4. If Am	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)													Line	Line)					
NEW YO	ORK N	v	10001											X Form	filed by One	e Repo	orting Perso	on 🛛	
		1	10001											Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																
	ecurities A	cqı	uired,	Disp	osed	of, c	or Bene	eficial	ly Owne	d									
1. Title of Security (Instr. 3) Date (Month/Date)					Execution Date,			3. Transaction Code (Instr.4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)							Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code V Amount (A) or (D) Price Transaction(s) (Instr. 3 and 4)					ction(s)			(1150.4)				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative						5. Number n of		Date Exemption		ole and		itle and ount of		8. Price of Derivative	9. Number derivative		10. Ownership	11. Nature of Indirect	

Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Iransaction Date (Month/Day/Year)	SA. Deemed Execution Date, if any (Month/Day/Year)	4. 5. NUMBER Transaction of Code (Instr. Derivative 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercise Expiration Date (Month/Day/N	ate	Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Restricted Stock Unit ⁽¹⁾	(2)	10/01/2012		Α		6		(3)	(4)	Common Stock	6	\$55.37	1,162	D		

Explanation of Responses:

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

2. This security will convert on a 1-for-1 basis into shares of the issuer's common stock.

2. These accurities used on Nevember 2, 2012, the visiting date of the critical BELL growt

3. These securities vest on November 3, 2012, the vesting date of the original RSU grant.

4. These securities do not expire.

Daniel J. Ross, Assistant

Secretary, pursuant to a power of attorney filed with the <u>Commission</u> 10/03/2012

** 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.