## Edgar Filing: AVON PRODUCTS INC - Form 4

AVON PRODUC	CTS INC									
Form 4										
October 02, 2013										
FORM 4	UNITED	статрс	SECU	DITIFS /		CHANCE	COMMISSION	Т	PPROVAL	
	UNITED	STATES						Number:	3235-0287	
Check this box										
if no longer subject to Section 16. Form 4 or	STATEM	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								
Form 5 obligations may continue. See Instruction 1(b).	Section 17(	a) of the H	Public U	tility Hol	ding Con		nge Act of 1934, of 1935 or Sectio 940	response on	. 0.5	
(Print or Type Respon	nses)									
1. Name and Address of Reporting Person <u>*</u> NOSKI CHARLES H			2. Issuer Name <b>and</b> Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
			AVON	PRODU	CTS INC	[AVP]	(Check all applicable)			
(Last) (First) (Middle) C/O AVON PRODUCTS, INC., 777 THIRD AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 09/30/2013			X_Director10% Owner Officer (give titleOther (specify below)below)				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
NEW YORK, N	Y 10017						Person	More than One Ro	eporting	
(City) (	(State)	(Zip)	Tab	le I - Non-J	Derivative	Securities A	cquired, Disposed	of, or Beneficial	lly Owned	
	ansaction Date tth/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	Code (Instr. 8)	4. Securiti onAcquired Disposed (Instr. 3, 4)	(A) or of (D)	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Report on	a separate line	tor each cla	ass of sec	urities bene	Perso inform requir	ns who rest nation cont ed to resp ys a curre	or indirectly. spond to the colle tained in this form ond unless the for ntly valid OMB co	i are not rm	SEC 1474 (9-02)	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8. Pr
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	Deri
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	) ( (	Acquired ( or Dispose (D) (Instr. 3, 4 and 5)	ed of					(Inst
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Deferred Stock Units (1)	<u>(2)</u>	09/30/2013		А	;	886.57		(1)	(1)	Common Stock	886.57	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
NOSKI CHARLES H C/O AVON PRODUCTS, INC. 777 THIRD AVENUE NEW YORK, NY 10017	Х						
Signatures							
Karen R. Leu, Attorney-In-Fact	10/02	2/2013					

\*\*Signature of Reporting Person

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Under the Board of Directors of Avon Products, Inc. Deferred Compensation Plan (the "Plan") directors may defer receipt of quarterly fees into a cash account or an Avon stock unit account. All amounts deferred are paid in cash upon termination of services as a director.
- (2) Units correspond 1-for-1 with common stock.
- (3) Pursuant to the Plan, the number of stock units credited quarterly is determined by dividing deferred quarterly fees by the average price of Avon stock during the last 10 trading days of such quarter.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.