FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	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

1. Name and Address of Reporting Person* PICHOTTA NICHOLAS J (Last) (First) (Middle) 6140 STONERIDGE MALL DRIVE SUITE 590							Issuer Name and Ticker or Trading Symbol COOPER COMPANIES INC [COO] Include the cooperation of the cooperation									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) CEO - CSI					
(Street) PLEASANTON CA 94588 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tab	le I - No	n-Deriv	/ative	e Se	curit	ies Ac	auired.	Dis	posed o	of. or Be	neficia	llv (Owned						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					action	ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A)			or 5. Amou 4 and Securiti Benefic Owned		nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) o	Price		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
Common	Stock		0/2011	/2011			М		1,000	1,000 A \$		21	3,668			D					
Common	Stock		0/2011				S		895	D	\$56.	\$ 56.21 2,		,773		D					
Common	Stock		0/2011				М		6,600) A	\$13	.1	9,	373		D					
Common	Stock		0/2011	/2011			S		5,707	7 D	\$56.	21	3,666			D					
		7	Table II -									, or Ben ble sec		y O	wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	ed Date,	4. Transaction Code (Instr 8)		5. Number of		6. Date Exercise Expiration Date (Month/Day/Yea		able and	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		De Se	3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: y Direct (D) or Indirec (I) (Instr.	Ownership	Beneficial Ownership tt (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares								
Stock Options (Right to Buy)	\$13.21	01/10/2011			М			1,000	(1)	1	2/09/2018	Common Stock	1,000		\$0	8,250		D			
Stock Options (Right to	\$13.1	01/10/2011			М			6,600	(2)	1	2/10/2018	Common Stock	6,600		\$0	19,800		D			

Explanation of Responses:

- 1. 12/10/08 NQ Grant: The options will vest in equal increments over four years measured from the date of grant as follows: 1/4 shall vest on 12/10/09; 1/4 shall vest on 12/10/10; 1/4 shall vest on 12/10/11; and 1/4 shall vest on 12/10/12.
- 2. 12/11/08 NQ Grant: The options will vest in equal increments over five years measured from the date of grant as follows: 1/5 shall vest on 12/11/10; 1/5 shall vest on shall vest on 12/11/12; and 1/5 shall vest on 12/11/13.

01/10/2011 /s/ Nicholas J. Pichotta

** 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.