FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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

1. Name and Address of Reporting Person*  McBride Daniel G						2. Issuer Name and Ticker or Trading Symbol COOPER COMPANIES INC [ COO ]										eck all appli	ng Person(s) to Issuer  10% Owner  Other (specify		vner	
(Last) (First) (Middle) THE COOPER COMPANIES, INC. 6140 STONERIDGE MALL ROAD, SUITE 590						3. Date of Earliest Transaction (Month/Day/Year) 01/08/2013										X Officer (give title Other (specify below)  VP, General Counsel & CRO				
(Street) PLEASANTON CA 94588					_   4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
(City)	(5		(Zip)	- Davis				A.						Dan		h. O				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transar Date (Month/Date)					action		2A. Deemed Execution Date, if any (Month/Day/Year)		, 3. Tra	3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3,		d (A) or	5. Amount of d Securities Beneficially Owned Followin		6. Owner Form: Di (D) or Inc (I) (Instr.	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Cod	e v		Amount		A) or D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock 01/08					8/2013	2013			M		$\neg$	2,250	0	A	\$0	11	1,862			
Common Stock 01/08					3/2013				F	Ť		1,229	(1)	D	\$0	10	,633	D		
Common Stock 01/08/					8/2013	3			M			1,97	6	A	\$0	12	12,609			
Common Stock 01/08/					8/2013	/2013						1,032	(1)	D	\$0	11	11,577			
Common Stock																2,120		I		401(k) Plan
		7	able II -	Deriva (e.g., p							•	-	-		-	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Da	Date,	4. Transactior Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Yea			Amoun Securiti Underly Derivati		unt of rities		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ow Fo Dir or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Exp Dat	xpiration ate	C		Amount or Number of Shares					
Restricted Stock Units	\$0 <sup>(2)</sup>	01/08/2013			M			2,250	(3)			(4)	Comm		2,250	\$0	4,500		D	
Restricted Stock	<b>\$∩</b> (2)	01/08/2013			м			1 976	(5)			(4)	Comn	non	1.976	\$0	5 926		D	

## **Explanation of Responses:**

Units

- $1. \ Shares \ withheld \ to \ cover \ applicable \ tax \ obligations. \ A \ FMV \ (closing \ price \ of \ the \ company's \ common \ stock \ on \ 1/8/13) \ of \ \$96.04 \ was \ used.$
- 2. RSU Exercise Price: There is no exercise price associated with the grant of Restricted Stock Units.
- 3. Grant Date 11/29/10 RSU Vesting Date: The grant vests in equal portions on the following dates: 1/8/12, 1/8/13, 1/8/14 and 1/8/15.
- 4. RSU Expiration Date: This award has no expiration date. Units will either vest or be forfeit.
- $5. \ Grant\ Date\ 12/14/11\ RSU\ Vesting\ Date: The\ grant\ vests\ in\ equal\ portions\ on\ the\ following\ dates:\ 1/8/13,\ 1/8/14,\ 1/8/15\ and\ 1/8/16.$

01/10/2013 /s/ Daniel G. McBride

\*\* 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.