

COTY INC.

Form 4

November 18, 2013

FORM 4**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

Check this box
if no longer
subject to
Section 16.
Form 4 or
Form 5
obligations
may continue.
See Instruction
1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF
SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

OMB APPROVAL

OMB
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(Print or Type Responses)

1. Name and Address of Reporting Person *
Rhône Capital L.L.C.

(Last) (First) (Middle)

630 FIFTH AVE., 27TH FLOOR

(Street)

NEW YORK, NY 10111

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading
Symbol

COTY INC. [COTY]

3. Date of Earliest Transaction
(Month/Day/Year)

11/15/2013

4. If Amendment, Date Original
Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to
Issuer

(Check all applicable)

☒ Director ☒ 10% Owner
☐ Officer (give title below) ☐ Other (specify below)

6. Individual or Joint/Group Filing(Check
Applicable Line)
☐ Form filed by One Reporting Person
☒ 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. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Class A Common Stock	11/15/2013		A	10,000 (1)	A \$ 0 34,167	I	See Footnotes (1) (2) (3)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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information contained in this form are not
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SEC 1474
(9-02)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)**

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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)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Deriv Secur Benefi Own Follo Repo Trans (Instr.
				Code	V	(A)	(D)	Amount or Number of Shares	
						Date Exercisable	Expiration Date	Title	

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Rhone Capital L.L.C. 630 FIFTH AVE., 27TH FLOOR NEW YORK, NY 10111	X	X		
Rhone Holdings III L.L.C. 630 FIFTH AVE., 27TH FLOOR NEW YORK, NY 10111	X	X		
Rhone Capital III L.P. 630 FIFTH AVE., 27TH FLOOR NEW YORK, NY 10111	X	X		
Rhone Group L.L.C. 630 FIFTH AVE., 27TH FLOOR NEW YORK, NY 10111	X	X		
Worldwide Beauty GP L.L.C. 630 FIFTH AVE., 27TH FLOOR NEW YORK, NY 10111	X	X		
Worldwide Beauty Offshore L.P. 630 FIFTH AVE., 27TH FLOOR NEW YORK, NY 10111	X	X		
Worldwide Beauty Onshore L.P. 630 FIFTH AVE., 27TH FLOOR NEW YORK, NY 10111	X	X		

Signatures

/s/ M. Allison Steiner, Authorized Signatory for Rhone Capital L.L.C. 11/18/2013

 **Signature of Reporting Person

Date _____

/s/ M. Allison Steiner, Authorized Signatory for Rhone Holdings III L.L.C. 11/18/2013

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<u>Signature of Reporting Person</u>	Date
/s/ M. Allison Steiner, Authorized Signatory for Rhone Capital III L.P.	11/18/2013
<u>Signature of Reporting Person</u>	Date
/s/ M. Allison Steiner, Authorized Signatory for Rhone Group L.L.C.	11/18/2013
<u>Signature of Reporting Person</u>	Date
/s/ M. Allison Steiner, Authorized Signatory for Worldwide Beauty GP L.L.C.	11/18/2013
<u>Signature of Reporting Person</u>	Date
/s/ M. Allison Steiner, Authorized Signatory for Worldwide Beauty Offshore L.P.	11/18/2013
<u>Signature of Reporting Person</u>	Date
/s/ M. Allison Steiner, Authorized Signatory for Worldwide Beauty Onshore L.P.	11/18/2013
<u>Signature of Reporting Person</u>	Date

Explanation of Responses:

- * 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).
- Represents Restricted Stock Units received by M. Steven Langman in connection with his service on the Board of Directors of the Issuer.
- (1) Mr. Langman has an understanding with entities affiliated with Rhone Capital L.L.C. pursuant to which he holds his reported securities for the benefit of entities affiliated with Rhone Capital L.L.C.
- This Statement is being filed by Rhone Capital L.L.C., Rhone Holdings III L.L.C., Rhone Capital III L.P., Rhone Group L.L.C., Worldwide Beauty GP L.L.C., Worldwide Beauty Offshore L.P, and Worldwide Beauty Onshore L.P (collectively, the "Reporting Persons"). The principal business address of each Reporting Person is 630 Fifth Ave., 27th Floor, New York, New York 10111. One or more of the Reporting Persons are party to a stockholders agreement that relates to the voting of the shares covered by this Report and, as such, may be deemed to be a member, or members, of a group holding over 10% of the outstanding Common Stock of the Issuer for purposes of Section 13(d)(3) of the Securities Exchange Act of 1934. (Continued in Footnote 3)
- (2) The filing of this Report is not an admission that the Reporting Persons are members of a group or beneficial owners of any shares other than those in which they have a pecuniary interest. Each of the Reporting Persons disclaims beneficial ownership of the securities reported herein, except to the extent of its respective pecuniary interests.
- (3)

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.