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AVON PRODUCTS INC Form 3 January 10, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB Number 3235-0104

INITIAL STATEMENT OF 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

(Print or Type Responses)

| 1. Name and Address of Reporting Person <u>*</u> MATHEW SARA | | | 2. Date of Event Requiring Statement (Month/Day/Year) | 3. Issuer Name and Ticker or Trading Symbol AVON PRODUCTS INC [AVP] | | | | | |
|---|--------|---------------|--|--|--|----------------------------|--|--|--|
| (Last) (F | First) | (Middle) | 01/01/2014 4. Relationship of Reporting Person(s) to Issuer | | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | |
| C/O AVON PRO INC., 777 THI | | | | (Check all applicable) | | | | | |
| (St | | | | OfficerOther (give title below) (specify below) | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting | | |
| NEW YORK,Â | NYÂ 10 | 0017 | | | | | Person Form filed by More than One Reporting Person | | |
| (City) (S | tate) | (Zip) | Table I - N | Non-Derivat | ive Securiti | ties Beneficially Owned | | | |
| 1.Title of Security (Instr. 4) | | | 2. Amount o Beneficially (Instr. 4) | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nat Owner (Instr. | 1 | | |
| Reminder: Report of owned directly or in | • | e line for ea | ch class of securities benefic | ^{ially} SI | EC 1473 (7-02) |) | | | |
| 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 control number. | | | | | | | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | |

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Securities Underlying Derivative Security | | 4. Conversion or Exercise | 5. Ownership Form of | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---|--|--------------------|--|----------------------------------|---------------------------------|---|---|
| | | | (Instr. 4) | | Price of | Derivative | |
| | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | Derivative Security | Security: Direct (D) or Indirect (I) | |

(Instr. 5)

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| MATHEW SARA C/O AVON PRODUCTS, INC. 777 THIRD AVENUE NEW YORK, NY 10017 | ÂX | Â | Â | Â | | |
| Signatures | | | | | | |
| Karen R. Leu, Attorney-In-Fact | 01/10/ | 2014 | | | | |
| ** Signature of Reporting Person | Da | te | | | | |
| Explanation of Day | | | | | | |

Explanation of Responses:

No securities are beneficially owned

* If the form is filed by more than one reporting person, *see* Instruction 5(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).

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Remarks:

No securities are beneficially owned.

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.