FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Marsili Daniel B							2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]											10% Ow Other (sp	ner	
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 02/05/2013									Sr. VP Global Human Resources					
(Street) NEW YORK NY 10022 (City) (State) (Zip)					_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Inc Line)										lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye						2A. Deemed Execution Date,			3. Transa Code (8)	ction	4. Securities Disposed Of	(A) or		5. Amount o Securities Beneficially Owned Follo Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		. Nature f Indirect seneficial ownership		
									Code	v	Amount	(A) or (D)	Price		Transac (Instr. 3	tion(s)		(nstr. 4)	
Common Stock 02/05/201						3		M ⁽¹⁾		28,000	A	\$68.	.15	79	,769)			
Common Stock 02/05/201					013	3			S ⁽²⁾		28,000	D	\$109.5	09.5638 ⁽³⁾		1,769)		
Common Stock															10,318		I 4	By ssuer's 101(k) Plan Trustee		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
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		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Da Expir (Mon		rcisable and Date	7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		unt 8.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly D	0. Ownership Form: Oirect (D) or Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amou or Numb of Share	ber						
Stock Option (Right to	\$68.15	02/05/2013			M ⁽¹⁾			28,000	09/1	2/2010	09/12/2013	Comm Stock		000	\$0	0		D		

Explanation of Responses:

- 1. Exercise of stock options awarded under the issuer's employee stock option plan.
- 2. Sale of shares with a portion of the proceeds delivered to the issuer for payment of the exercise price of options under the issuer's employee stock option plan and the related tax withholding.
- 3. Weighted average price, as these shares were sold in multiple transactions at prices ranging from \$109.47 to \$109.71, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, additional information regarding the number of shares sold at each separate price within the range set forth in this footnote.

Remarks:

/s/ Joyce McCarthy, Attorneyin-Fact

02/07/2013

** 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.