FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL |
|---|-------------------------|-----------|
| | OMB Number: | 3235-0287 |
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| 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* Dolan Victoria L (Last) (First) (Middle) | | | | | | Solve (2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] Solve (2. Issuer Name and Ticker or Trading Symbol Color (2. Issuer Name and Ticker or Trading Symbol (2. Issuer | | | | | | | | | all app Direct Office below | blicable) ctor er (give title w) | below | wner (specify |
|---|---|------------|----------|--|-----------------|---|--------|---|----------------|---|-----------------------|---|----------|-------------------------------|--|---|--|---|
| C/O COI 300 PAR | | 02/26/2013 | | | | | | | | VP & Corporate Controller | | | | | | | | |
| (Street) NEW YORK NY 10022 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | b. Indiv Line) X | idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| | | Tab | le I - N | lon-Deriv | ative | Sec | uritie | s Ac | quire | d, Di | sposed o | f, or B | enefic | ially | Owne | ed | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) | | 4. Securities Disposed Of | | Benefic | | ities Ficially (d Following (| 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Trans | action(s) 3 and 4) | | (Instr. 4) |
| Common | Stock | | | 02/26/2 | 013 | 13 | | S ⁽¹⁾ | | 1,079 | D | \$113. | 6381 | 19,353 | | D | | |
| Common Stock | | | | | | | | | | | | | | | | 441 | I | By Issuer's 401(k) Plan Trustee |
| | | Ta | able II | | | | | | , | | osed of, convertib | | | • | vned | | | |
| 1. Title of Derivative Security (Instr. 3) | erivative Conversion Date Ecurity or Exercise (Month/Day/Year) if | | if any | eemed tition Date, h/Day/Year) 4. Transa Code 8) | | | | Expira (Mont | e Exercation D | Year) Securities Underlying Derivative Security (Instr. and 4) Amour | | t of ies ying ive y (Instr. 3 Amount or Number of | nt er | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. Sale of shares with proceeds delivered to the issuer for payment of tax liability incident to vesting of a restricted stock award under the issuer's Executive Incentive Compensation Plan. This sale was effected pursuant to a Rule 10b5-1 trading plan.

Remarks:

/s/ Nina Huffman, Attorney-in-Fact 02/28/2013

** 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.