FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

| wasinigton, | D.C. 20343 |
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| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|-------------------|---------------|-----------|

| | OMB APPROVAL | | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | | |
| | 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* <u>Arora Nikesh</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] | | | | | | | | Relationshi (Check all ap X Dire | | olicable) | | Person(s) to Issuer 10% Owner | | |
|---|--|-------------|-----------|---|------------|--|--------------|-------|---|--|---------|--------------|-------------------------------|---|---|--|---|----------------------------------|----------|----------|
| | GATE-PA | LMOLIVE COM | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/01/2013 | | | | | | | | | Office belov | er (give title w) | | Other (below) | (specify | |
| 300 PARK AVENUE (Street) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| NEW YO | ORK N | Y 1 | .0022 | | | | | | | | | | X | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (S | tate) (| Zip) | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Nor | n-Deriv | ative | Sec | curitie | s Acq | juired, | Dis | posed o | f, o | r Ben | efici | ally | Owne | ed | | | |
| Date | | | | Execution Day/Year) if any | | cution Date, | | | | ties Acquired (A) I Of (D) (Instr. 3, 4 | | | l and Secu Bend Own | | cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | (1130.4) |
| Common Stock | | | | | 07/01/2013 | | | | A ⁽¹⁾ | | 108 | | A | \$57 | '.97 | 7,358 ⁽²⁾⁽³⁾⁽⁴⁾ | | D | | |
| | 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) (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 6. Month/Day/Year) 6. Month/Day/Year | | Date, | | ransaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Date Expiration Date (Month/Day/Year) Expiration Date Sec Und Derivative (Month/Day/Year) Sec and Derivative (Month/Day/Year) Sec and Derivative (Month/Day/Year) Sec and Derivative (Month/Day/Year) Sec and Derivative (Month/Day/Year) | | Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | Deri Secu | rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | Code | | | of | mber ares | | | | | | | | | | | | | |

Explanation of Responses:

- 1. Portion of annual cash retainer deferred to a stock unit account pursuant to the Deferred Compensation Plan for Non-Employee Directors.
- 2. All amounts reported on this Form 4 reflect the 2-for-1 stock split of the common stock of the issuer effective as of May 15, 2013.
- 3. Amount as of July 1, 2013.
- 4. Includes shares held in the Arora Trust that were previously reported as indirectly held.

Remarks:

/s/ Kristine Hutchinson, Attorney-in-Fact 09/03/2013

** 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.