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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

| 1. Name and Addre | 1 0 | Person* | 2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|-------------------|-------------|----------|--|-------------------|--|-----------------------|--|--|--|--|
| <u>COOK IAN</u> | <u>IVI</u> | | [] | X | Director | 10% Owner | | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | - x | Officer (give title below) | Other (specify below) | | | | |
| C/O COLGATE | E-PALMOLIVE | ECOMPANY | 02/25/2014 | | Chairman, Presid | lent & CEO | | | | |
| 300 PARK AVE | ENUE | | | | | | | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | vidual or Joint/Group Filii | ng (Check Applicable | | | | |
| NEW YORK | NY | 10022 | | X | Form filed by One Re | porting Person | | | | |
| | | | — | | Form filed by More the Person | an One Reporting | | | | |
| (City) | (State) | (Zip) | | | | | | | | |

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) | Code (| Transaction Disposed Of (D) (Instr. 3, 4 and 5) Code (Instr. | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
|---------------------------------|--|---|------------------|---|--------|---|---|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 02/25/2014 | | S ⁽¹⁾ | | 61,940 | D | \$61.8809 | 1,009,483 | D | |
| Common Stock | | | | | | | | 58,732 | Ι | By 2012 GRAT |
| Common Stock | | | | | | | | 82,836 | Ι | By 2013 GRAT |
| Common Stock | | | | | | | | 101,867 | I | By Issuer's 401(k) Plan Trustee |

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

| | ut3, 0 | uis, cans, warrants, options, conventible 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 (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 Securities Underlying Derivative Security (Instr. 3 and 4) | | Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

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 unit award under the issuer's Executive Incentive Compensation Plan. This transaction was effected pursuant to a Rule 10b5-1 trading plan.

<u>/s/ Kristine Hutchinson,</u> <u>Attorney-in-Fact</u>

02/27/2014

** 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.