FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049

STATEMENT OF (CHANGES IN BENEFI	ICIAL OWNERSHIP

OMB APPROVAL

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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* HICKEY DENNIS J						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]									(Check	all app Dired	ship of Reporting applicable) irector fficer (give title		Person(s) to Issuer 10% Owner Other (specify		
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE				12/	3. Date of Earliest Transaction (Month/Day/Year) 12/05/2013									X	belo	w) `` Chief Finaı	below) ancial Officer				
(Street) NEW YC			10022 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indi Line) X	Forn Forn	ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - No	n-Deriv	ative	Se	curit	ies Ac	quired	, Dis	posed o	f, o	r Be	nefic	ially	Owne	ed				
Date				:h/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Securities Beneficially Owned Follow		ities icially d Following	Form: Dir (D) or Indi		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Pri	се	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock			12/05	/2013	3			F ⁽¹⁾		657		D	\$6	64.54	3	62,242		D		
Common Stock															5	50,457		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)																				
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution D or Exercise (Month/Day/Year) if any		ı Date, ay/Year)	4. Transaction Code (Instr. 8)		or of cervative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirati (Month/	on Date	Securities Underlying Derivative Security (In and 4) Am or Nui		of s g e lnstr. : mount r umbei	Deri Sec (Ins:	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ov Fo Dii or (I)	o. wnership orm: irect (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

1. Payment of Medicare and income tax liability by withholding shares of stock from restricted shares previously granted under the issuer's Executive Incentive Compensation Plan. The reporting person continues to hold the restricted shares originally granted, less the amount of this required tax withholding.

/s/ Kristine Hutchinson, Attorney-in-Fact

12/09/2013

** 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.