FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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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 an | | 2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] | | | | | | | | (Check | all app Dired | olicable) ctor | g Person(s) to Is | Owner | | | | |
|---|--|--|-----------|---|---------|---|--------|--|------------------------------|--------|---|-------------------|-------------------|---|---|---|--|---|
| (Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE | | | | | 02/2 | 3. Date of Earliest Transaction (Month/Day/Year) 02/27/2014 | | | | | | | | X Officer (give title Other (specify below) COO Gl.Innov.&Gwth,Eur.&Hill's | | | | |
| (Street) NEW YORK NY 10022 (City) (State) (Zip) | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Chec Line) X Form filed by One Reporting P Form filed by More than One R Person | | | | | | | | | | | Reporting Pers | son | | |
| | | Tak | ole I - N | on-Deriva | ative | Sec | uritie | s Ac | quired | d, Di | sposed o | f, or B | enefic | cially | Owne | ed | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/ | | | | | | Execution Date | | | 3. Transa Code (8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a | | | | 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 | | Trans | action(s) 3 and 4) | | (Instr. 4) |
| Common Stock 02/27/20 | | | | | | 14 | | | S ⁽¹⁾ | | 23,566 | D | \$61 | .7823 | 823 193,936 | | D | |
| Common Stock | | | | | | | | | | | | | | | 1 | 11,067 | 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) | vative Conversion Date Execution Dat urity or Exercise (Month/Day/Year) if any | | | on Date, | Code (I | ransaction of ode (Instr. Derivative | | 6. Date Exercisable and Expiration Date Expiration Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares | | 1 | | 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 unit award under the issuer's Executive Incentive Compensation Plan. This transaction was effected pursuant to a Rule 10b5-1 trading plan.

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

03/03/2014

** 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.