FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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1. Name and Address of Reporting Person* MARTIN RONALD T						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]									heck al ا ر	l app Direct	licable) tor		ssuer Owner (specify	
	`	LMOLIVE COM	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/29/2012									^ I	Officer (give title below) VP Global Soc		below)`	
(Street) NEW YC	ORK N	Y 1	10022		4. If	Ame	mendment, Date of Original Filed (Month/Day/Year)								ine) X	Form Form	al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson			
(City)	(3)		Zip) e I - No	n-Deriv	ative	Sec	curitie	es Aco	guired.	Dis	posed o	f. or	Bene	efici	ally O	wne	d			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			tion 2A. Deemed Execution Date			ed n Date,	3. Transa Code (I 8)	ction	4. Securities Acquired (A)				or 5. 4 and 5) Se Be		unt of ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A (D) or)	Price	Ti	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common	Stock			11/29/	2012				F ⁽¹⁾		23		D	\$108	3.01	7,851 D				
Common Stock														6,263		I	By Issuer's 401(k) Plan Trustee			
		Та									sed of, onvertib					ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execution if any	Execution Date, 1		I. Fransaction Code (Instr. 3)		n of		6. Date Exercis Expiration Dat (Month/Day/Ye		7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)			8. Price Derivat Securit (Instr. 5	vative urity tr. 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 V		(A)) (D)	Date Exercisa		Expiration Date	Title	or Nur of Sha	nber						

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/ Joyce McCarthy, Attorneyin-Fact

12/03/2012

** 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.