Nelson Rosemary Form 4 May 15, 2013

FORM 4

OMB APPROVAL

5. Relationship of Reporting Person(s) to

Issuer

Persons who respond to the collection of

information contained in this form are not

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

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

Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

COLGATE PALMOLIVE CO ICLI

Symbol

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

1(b).

(Print or Type Responses)

Nelson Rosemary

1. Name and Address of Reporting Person *

			COLGATE PALMOLIVE CO [CL]				CL	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction						**		
			(Month/D	Day/Year)				Director		Owner	
C/O COLG	05/13/2	05/13/2013					_X_ Officer (give title Other (specify				
COMPANY						below) below) VP-Dep Gen Counsel, Operations					
								•			
(Street) 4. If A				endment, Da	ate Origina	ıl		6. Individual or Joint/Group Filing(Check			
Filed(Month/Day/Year)							Applicable Line)				
							X Form filed by One Reporting Person Form filed by More than One Reporting				
NEW YORK, NY 10022								Person			
(City)	(State)	(Zip)									
(City)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of	2. Transaction I	Date 2A. Dee	emed	3.	4. Secur	ities A	cquired	5. Amount of	6.	7. Nature of	
Security (Month/Day/Year) Execution Day								Securities	Ownership	Indirect	
(Instr. 3)		any	/D /N/	Code (Instr. 3, 4 and 5)			. 5)	Beneficially	Form: Direct		
		(Month/	Day/Year)	ay/Year) (Instr. 8)			Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)		
								Reported	(Instr. 4)	(msu. 4)	
						(A)		Transaction(s)	,		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common				Code v	Amount	(D)	\$				
	05/13/2013			$\mathbf{M}_{\underline{(1)}}$	7,000	A	^{\$} 73.23	22,350	D		
Stock							13.23				
Common	05/12/2012			c (2)	7,000	D	¢ 101	15 250	D		
Stock	05/13/2013			S(2)	7,000	D	\$ 121	15,350	D		
										D I '	
C										By Issuer's	
Common								2,577	I	401(k)	
Stock								,		Plan	

Trustee

SEC 1474

(9-02)

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number omf 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 Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 73.23	05/13/2013		M <u>(1)</u>		7,000	09/10/2012	09/10/2015	Common Stock	7,000

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Nelson Rosemary C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE NEW YORK, NY 10022

VP-Dep Gen Counsel, Operations

Signatures

/s/ Nina Huffman, Attorney-in-Fact 05/15/2013

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) Exercise of stock options awarded under the issuer's employee stock option plan.
- (2) Sale of shares with a portion of the proceeds delivered to the issuer for payment of the exercise price of options under the issuer's employee stock option plan and the related tax withholding.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2