FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

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

| | | | | | | | , | <i>'</i> | | | | | | | | | | | | | |
|-----------------------------------------------------------------------|-----------------------------------------------------------------------|------------------------------------------------------------|------------------|---------|-------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------------------------|------------------------------------------------------------------------------|---------|-------------------------------------------------|---------------------|--------------------------------------------------------------------------------|-------------|--------------|-------------------------------------------|------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------|--------------------------------------------------------------------|--|
| 1. Name and Address of Reporting Person* Marsili Daniel B | | | | | | 2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] | | | | | | | | | Check a | ll app Direct | licable) | g Person(s) to Is 10% C Other | | wner | |
| (Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/06/2018 | | | | | | | | | Λ | below | v) `` | esourc | below) sources Officer | | | |
| (Street) NEW YORK NY 10022 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ine) <mark>X</mark> | Form | or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son | | | | |
| | | Tab | le I - No | n-Deriv | ative | Se | curiti | es Ac | quired, | Dis | posed o | f, or | Ben | efici | ally O | wne | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | ar) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (| Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | 4 and Secui Benef Owne | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | | v | Amount | | A) or D) | Price | , т | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common Stock 12/06/2 | | | | | 5/2018 | 2018 | | F ⁽¹⁾ | | 197 | 7 D \$ | | \$63 | 3.23 | 58,622 | | D | | | | |
| Common Stock | | | | | | | | | | | | | | | 29,580 | | I | | By Issuer's 401(k) Plan Trustee | | |
| | | Ta | able II - I (| | | | | | | | sed of, onvertib | | | | | ned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversior or Exercise Price of Derivative Security | rcise (Month/Day/Year) if any of (Month/Day/Yea tive | | Date, | 4. Transaction Code (Instr. 8) | | n of Deri Secon Acq (A) of Disp of (I (Inst and | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisi Expiration Date (Month/Day/Yea | | Amount of Securities Underlying Derivative Security (In: and 4) | | ount nber | 8. Price Deriva Securi (Instr. ! | tive ty 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owr Forr Dire or Ir (I) (I | ership n: ct (D) direct nstr. 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 stock units previously granted under the issuer's incentive compensation plan. The reporting person continues to hold the restricted stock units originally granted, less the amount of this required tax withholding.

/s/ Kristine Hutchinson, Attorney-in-Fact

12/10/2018

** 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.