FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL					
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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* KOGAN RICHARD J						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner															
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY						3. Date of Earliest Transaction (Month/Day/Year) 02/05/2015									Officer below)	er (give title		10% Owner Other (specify below)			
300 PARK AVENUE (Street)																6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
	NEW YORK NY 10022												21	Form filed by More than One Reporting Person							
(City)	(S		Zip)																		
		Tab	le I - N	Non-Deri	vative	e Sec	urit	ies A	cquire	ed, D	isposed (of, or B	enefic	ally	Owned	t					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year		Execution [Date,	3. Transaction Code (Instr. 8)			Acquired (A) or f (D) (Instr. 3, 4 an		Benef Owne		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 1		11/19/2	2014				G ⁽¹⁾	V	15,382	D	\$0	\$0		68,904		D					
Common	Common Stock 02/05/20			015	15		M ⁽²⁾		8,000	A	\$34.	\$34.43		76,904		D					
Common Stock 02/05/2			015	5 S ⁽³⁾ 8,000 D				\$70.07	45(4)	68	,904		D								
		Т	able I								sposed of , converti				wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed tion Date, n/Day/Year)	4. Transa Code (8)			ivative urities uired or oosed O) tr. 3, 4	Expiration I (Month/Day		ate	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		De Se (In	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	i C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amou or Numb of Share	er							
Stock Option (Right to	\$34.43	02/05/2015			M ⁽²⁾			8,000	(5		02/20/2017	Commor Stock	8,00	0	\$0	0		D			

Explanation of Responses:

- 1. Represents a bona fide gift.
- 2. Exercise of stock options awarded under the issuer's Non-Employee Director Stock Option Plan.
- 3. 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 Non-Employee Director Stock Option Plan.
- 4. Weighted average price, as these shares were sold in multiple transactions at prices ranging from \$70.03 to \$70.135, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, additional information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- $5. \ Option \ became \ exercisable \ in \ one-third \ increments \ beginning \ on \ the \ first \ anniversary \ of \ the \ February \ 20, \ 2007 \ grant \ date.$

Remarks:

/s/ Kristine Hutchinson, 02/09/2015 Attorney-in-Fact

** 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.