Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to | STATEMENT OF CHANGES IN BENEFICIAL | OWNERSHIP |
|--|------------------------------------|------------------|
| Section 16. Form 4 or Form 5 | | |
| obligations may continue. See | | |

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 and Address of Reporting Person* Marsili Daniel B | | | | | | 2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | /ner |
|--|---|--|---|--------|--|---|----------|--------------------------------------|--|--|------------------|--|---|---|---------------|---|---|----------------------------------|--|
| | LGATE-PA | LMOLIVE CON | (Middle) MPANY | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/25/2017 | | | | | | | | X | below) | er (give title w) ef Human Resou | | Other (s below) rces Offic | · |
| 300 PARK AVENUE | | | | _ 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) NEW Y | ORK N | Y | 10022 | | | Form filed | | | | | | ed by One Reporting Person ed by More than One Reporting | | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | Person | | | | |
| | | Tab | le I - Nor | ı-Deri | vativ | e Se | curities | s Ac | quired, E | Disp | osed o | f, or Be | neficia | lly O | wned | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | ear) | 2A. Deemed Execution Date, if any (Month/Day/Year | | Code (In | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) d Of (D) (Instr. 3, 4 | | and Securitie Beneficia | | s illy ollowing | Form (D) o | Form: Direct D) or Indirect I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Code | v | Amount | (A) o (D) | Price | т | Reported Fransacti Instr. 3 a | tion(s) | | | (Instr. 4) | | |
| | | - | Fable II - | | | | | | uired, Di | | | | | y Ow | ned | | | | |
| 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/Yea | Date, | 4. Transaction Code (Ins 1) 8) | | | | 6. Date Exercisable Expiration Date (Month/Day/Year) | | | 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4) | | Derivative Security | | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | Ownersl Form: Direct (Dor Indire (I) (Instr. | Ownership | Beneficial Ownership ct (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | xpiration ate | Title | Amount or Number of Shares | | | | | | |
| Stock Option (Right to Buy) | \$73 | 09/25/2017 | | | A ⁽¹⁾ | | 64,373 | | (2) | 0: | 9/25/2023 | Common Stock | 64,373 | \$0 | 0.0000 | 64,373 | 3 | D | |

Explanation of Responses:

- 1. Stock option award granted under the issuer's incentive compensation plan.
- 2. Option becomes exercisable in equal annual installments over three years beginning on the first anniversary of the September 25, 2017 grant date.

/s/ Nina Huffman, Attorney-in-09/27/2017 **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.