FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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(h)

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* Burton Nigel (Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE (Street) NEW YORK NY 10022						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] 3. Date of Earliest Transaction (Month/Day/Year) 03/07/2015 4. If Amendment, Date of Original Filed (Month/Day/Year)									5. Relationship of Reporting (Check all applicable) Director X Officer (give title below) Chief Market 6. Individual or Joint/Group F Line) X Form filed by One 8			10% Other below eting Officer Filing (Check A	Owner (specify) Applicable
(City)	(S		(Zip)													orm filed by More than One Reporting erson			
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					ction 2A. Deemed Execution Date,			3. Transaction		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				5. Amount of Securities Beneficially Owned Follow Reported		ount of ities icially d Following ted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	03/07/	2015			Code F ⁽¹⁾	v	Amount 739		(A) or (D)	Prio	9.25	(Instr.	action(s) 3 and 4) -3,435	D					
	Common Stock 03								F ⁽¹⁾		1,394		D	\$69.25		42,041		D	
Common Stock																1	4,627	I	By Issuer's 401(k) Plan Trustee
		Ta	able II - I								sed of, o					wned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		of		6. Date E: Expiration (Month/D	n Date	Ar) Se Ur) De Se		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Sec (Inst	ivative curity ctr. 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)		Date Exercisal		Expiration Date	Titl	of	mber ares					

Explanation of Responses:

1. Payment of tax liability by withholding shares from restricted stock units vesting under the issuer's Executive Incentive Compensation Plan.

Remarks:

/s/ Kristine Hutchinson, Attorney-in-Fact 03/10/2015

** 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.