FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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

Name and Address of Reporting Person* Marsili Daniel B						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]								Check	all applic	cable)	g Pers	on(s) to Issi 10% Ow Other (s	ner	
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE					06	3. Date of Earliest Transaction (Month/Day/Year) 06/15/2017									Chief Human Resources Officer					
(Street) NEW YORK NY 10022 (City) (State) (Zip)					_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(Oity)	(5			lon Deri	ivativ	o Soc	····it	ioc A	cauire	2d D	ienoead o	of or B	nefici	ally (Owned					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/				tion	n 2A. Deemed Execution Da		ed Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			5. Amou d 5) Securiti Benefic		int of es ally Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D) Price			Transac (Instr. 3	tion(s)			(11150.4)	
Common Stock 06/15/2					2017	17			M ⁽¹⁾		14,000	A	\$45.2	23	74	74,020		D		
Common Stock 06/15/20				2017	L 7			S ⁽²⁾		14,000	D	\$75.65	75.6513 ⁽³⁾		0,020		D			
Common Stock															28,248		I	By Issuer's 401(k) Plan Trustee		
		-	Table 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)	3A. Deemed Execution Date, if any		4. Transa Code (8)	ection	5. Number of		6. Dat		cisable and Date	7. Title and Am of Securities Underlying Derivative Seci (Instr. 3 and 4)		int 8.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	is Silly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	A) (D)	Date Exerc	isable	Expiration Date	Title	Amour or Number of Shares	er						
Stock Option (Right to Buy)	\$45.23	06/15/2017			M ⁽¹⁾		14,000		(4)		09/08/2017	Commor Stock	14,00	00	0.000	14,000		D		

Explanation of Responses:

- 1. Exercise of stock options awarded under the issuer's employee stock option plan. This transaction was effected pursuant to a Rule 10b5-1 trading 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. This transaction was effected pursuant to a Rule 10b5-1 trading plan.
- 3. Weighted average price, as these shares were sold in multiple transactions at prices ranging from \$75.55 to \$75.72, 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.
- 4. Option became exercisable in one-third increments beginning on the first anniversary of the September 8, 2011, grant date.

/s/ Nina Huffman, Attorney-in-06/19/2017 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.