FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average b	ourden							

0.5

hours per response:

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

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* <u>Skala Justin</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol COLGATE PALMOLIVE CO [ CL ]											all app Direc		g Perso	10% C	wner
	(Fi LGATE-PAI K AVENUI	LMOLIVE COM	Middle)		3. Date of Earliest Transac 05/04/2016						action (Month/Day/Year)							Officer (give title below)  COO NA, Eur, Afr/E & Gl Sust			
(Street)  NEW YC  (City)			10022 (Zip)		4. If	f Am	endme	ent, [	Date of	f Original Filed (Month/Day/Year)							vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	le I - Noi	n-Deriv	ative	Se	curi	ties	Acq		Dis	posed o	f, o	r Bei	nefi	cially	Owne	ed			
			2. Transaction Date (Month/Day/Year)		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.						4 and Sec Ber Ow		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	(A) or (D)		Pri	ce	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 05/0				05/04	l/2016	5			<b>G</b> <sup>(1)</sup>	V	145		D	!	\$ <mark>0</mark> (1)	97,490		I	)		
Common Stock				12/01	12/01/2016				<b>F</b> <sup>(2)</sup>		432		D	\$	55.08	97,345		D			
Common Stock																	5	7,724	]	I	By Issuer's 401(k) Plan Trustee
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transa Code (I		on of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E Expiratio (Month/D	n Date	able and 7. Titl Amou Ir) Secur Unde Deriv Secur		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of		Deri Sec (Ins	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own For Dire or I (I) (	nership m: ect (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## Explanation of Responses:

- 1. Bona fide gift.
- 2. Payment of Medicare and income tax liability by withholding shares of stock from restricted shares previously granted under the issuer's Executive Incentive Compensation Plan. The reporting person continues to hold the restricted shares originally granted, less the amount of this required tax withholding.

## Remarks:

/s/ Kristine Hutchinson, Attorney-in-Fact 12/05/2016

\*\* 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.