## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 20549
---------------	------------

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

**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* <u>Skala Justin</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol  COLGATE PALMOLIVE CO [ CL ]								Check	all application	or 10% Owne		ner		
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 08/10/2015									X Officer (give title Other (specify below)  Pres Colgate N Amer & Gl Sust					
(Street) NEW YO	ORK N	Y	10022 (Zip)		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicabe)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				ı
		Tak	ole I - I	Non-Der	ivativ	e Sec	curit	ies A	cquire	ed, D	isposed o	of, or B	enefici	ally (	Owned				
Date			Date	2. Transaction Date (Month/Day/Year)		Execution Date, ar) if any		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Beneficia		es ally	6. Ownership Form: Direct (D) or Indirect	ect ( rect (	7. Nature of Indirect Beneficial Ownership	
						(MONIN		yi i cai j	Code	v	Amount	t (A) or Price			Owned Following Reported Transaction(s) (Instr. 3 and 4)		(I) (Instr. 4)		(Instr. 4)
Common Stock			06/04/2015		5		G <sup>(1)</sup>	V	450	D	\$0	\$0		94,650		$\neg$			
Common Stock		06/11/2015		5		<b>G</b> <sup>(1)</sup>	V	75	D	\$0	)	94	,575	D					
Common Stock			08/10/2015		5		M <sup>(2)</sup>		80,000	A	\$36.	61	174	4,575	D				
Common Stock			08/10/2015				<b>S</b> <sup>(3)</sup>		80,000	D	\$68.88	68.8823 <sup>(4)</sup> 9 <sub>4</sub>		,575	D				
Common Stock														55	,835	I	]	By Issuer's 401(k) Plan Trustee	
			Table						-		sposed of, s, converti			-	wned				'
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Executive or Exercise (Month/Day/Year) if any		if any	tion Date, Tran		action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Dat Expira (Mont	ation E		7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		De	Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	n: ct (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	e V	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amour or Number of Shares	er					
Stock Option (Right to Buy)	\$36.61	08/10/2015			М			80,000	(5)		09/10/2015	Commor Stock		000	\$0	0		D	

### **Explanation of Responses:**

- 1. Bona fide gift.
- 2. Exercise of stock options awarded under the issuer's employee 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 employee stock option plan and the related tax withholding.
- 4. Weighted average price, as these shares were sold in multiple transactions at prices ranging from \$68.77 to \$69.02, 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 becomes exercisable in one-third increments beginning on the first anniversary of the grant date.

# Remarks:

/s/ Kristine Hutchinson, Attorney-in-Fact

08/12/2015

\*\* 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.