FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	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

	nd Address of Daniel E	Reporting Person*									g Symbol <mark>E CO</mark> [CI	2]			all applic Directo	cable)	g Perso	on(s) to Issu 10% Ow Other (s)	ner
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE				04	3. Date of Earliest Transaction (Month/Day/Year) 04/15/2015									below) Sr. VP	Sr. VP Global Human Resources				
(Street) NEW YO			10022		_ 4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Form filed by One Re Form filed by More th Person		Repor	eporting Person	
(City)	(S	·	(Zip)	lon Dori	ivotiv	. 500		ioo A			ionocod o	of or D	opoficia	ally (Ownad				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/			tion	on 2A. Dee Execution Year) if any		Deemed oution Date,		action (Instr.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Follo		int of es ally Following	Form:	Direct Condition of the	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)
Common Stock 04/15/20			2015	15			M ⁽¹⁾		14,000	A	\$36.6	51	89	89,229		D			
Common Stock 04/15/20			2015	15			S ⁽²⁾		14,000	D	\$69.92	69.9289 ⁽³⁾		75,229		D			
Common Stock													26,242			I Z	Sy ssuer's 401(k) Plan Trustee		
		7	Table I								sposed of, , convertil				wned				
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Date Execut		4. Transaction Code (Instr. 8)		5. Number		6. Date Exer Expiration I (Month/Day		cisable and Oate	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		nt 8.	. Price of Perivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amour or Number of Shares	er					
Stock Option (Right to	\$36.61	04/15/2015			M ⁽¹⁾			14,000	((4)	09/10/2015	Commo Stock	n 14,00	0	\$0	56,000		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 \$69.62 to \$70.24, 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 10, 2009 grant date.

Remarks:

/s/ Kristine Hutchinson, 04/17/2015 Attorney-in-Fact

** Signature of Reporting Person

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.