FORM 4

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TATEMENT	<b>OF CHANGE</b>	ES IN BENEF	<b>FICIAL OWN</b>	<b>IERSHIP</b>

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b) 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*  HENDRY ANDREW D						2. Issuer Name <b>and</b> Ticker or Trading Symbol  COLGATE PALMOLIVE CO [ CL ]								Check	c all applic Directo	r	g Perso	on(s) to Issi 10% Ow Other (s	vner
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 11/25/2014								X	Officer (give title below)  Vice Chairman			респу		
(Street)  NEW YO	ORK N	Y	10022 (Zip)		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indir _ine) X	Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - I	Non-Deri	ivativ	e Sec	curit	ies A	cquire	ed, D	isposed c	f, or B	enefici	ally	Owned				
, ,		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Beneficial Owned Fo		s F ally (i ollowing (i	Form:	Direct Indirect Itstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price			Fransaction(s)			(Instr. 4)
Common Stock		11/25/2	2014				M <sup>(1)</sup>		10,000	A \$	\$36.	61	218,803		D				
Common	Stock			11/25/2	2014				S <sup>(2)</sup>		10,000	D	\$67.93	65 <sup>(3)</sup>	<sup>(3)</sup> 208,803 I		D		
Common	Stock														7,147 I		I	By Issuer's 401(k) Plan Trustee	
Common Stock										7,522			Ι :	By Son <sup>(4)</sup>					
Common Stock													1,569				By Spouse <sup>(4)</sup>		
		-	Table								sposed of, , converti				wned				
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execut if any			ransaction ode (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	ode V (A) (D)	(D)	Date Exerc	isable	Expiration Date	Title	Amou or Numb of Share	er						
Stock Option (Right to Buy)	\$36.61	11/25/2014			M <sup>(1)</sup>			10,000	09/10	)/2012	09/10/2015	Commo Stock	n 10,00	00	\$0.0000	40,000	)	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 \$67.82 to \$68.03, 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. The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

/s/ Nina Huffman, Attorney-in-11/26/2014 **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.