## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D	D.C. 20549
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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*  JAKOBSEN HENNING I						2. Issuer Name <b>and</b> Ticker or Trading Symbol COLGATE PALMOLIVE CO [ CL ]									all applic	cable)	g Person(s) to Issur 10% Owr Other (sp		ner
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 02/05/2018								X	below) below)  VP & Corporate Controller				
(Street) NEW YORK NY 10022 (City) (State) (Zip)					-	4. If Amendment, Date of Original Filed (Month/Day/Year)									dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriv  1. Title of Security (Instr. 3)  2. Transactic Date (Month/Day/				tion	on 2A. Deemed Execution Date,		i Date,	3. Transaction Code (Instr. 8)					5. A Sec Ben Owr		int of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D) Price		Reporte Transac (Instr. 3		tion(s)			(Instr. 4)
Common	Stock			02/05/2	018				M <sup>(1)</sup>		41,300	A	\$52.2	27	70	,783	D		
Common Stock 02				02/05/2	.018				<b>S</b> <sup>(2)</sup>		36,215	D	\$71.21	66(3)	34	,568	D		
Common Stock														2	:38	I	Is 4 P	By ssuer's 01(k) 'lan Trustee	
		٦	Table I						•	•	sposed of, , converti			•	wned				·
Derivative Conversion Date Executive or Exercise (Month/Day/Year) if an			if any	ion Date,		ransaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exer ation D :h/Day/			rities ing ve Securit	De Se	erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Ind (I) (Ins	(D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	V (A) (D)	(D)	Date Exerc	isable	Expiration Date	Title	Amour or Numbe of Shares	er						
Stock Option (Right to	\$52.27	02/05/2018			M <sup>(1)</sup>			41,300	(	4)	09/13/2018	Commo	<sup>n</sup> 41,30	00 \$	0.0000	0.0000	) D		

## **Explanation of Responses:**

- 1. Exercise of stock options awarded under the issuer's employee stock option plan.
- 2. Sale of shares with 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.
- 3. Weighted average price, as these shares were sold in multiple transactions at prices ranging from \$70.95 to \$71.52, 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 13, 2012 grant date.

/s/ Kristine Hutchinson, Attorney-in-Fact

02/07/2018

\*\* 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.