Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	ΩF	CHANGES
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OMB APPROVAL S IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person* Parameswaran Prabha						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last)		Date o		iest Trai	nsaction	n (Mon	th/Day/Year)	X	below)	Officer (give title below) Other below Grp Pres, Glbl Innov. & AF/)``						
300 PAR	K AVENU	E			_ 4.	If Ame	ndme	nt, Date	of Orig	inal Fi	led (Month/Da	6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) NEW Y	ORK N	Y	10022												Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(S	State)	(Zip)												Persor	1			
		Tak	ole I - I	Non-Deri	vativ	e Se	curit	ties A	cquire	ed, D	isposed o	of, or Bo	enefi	cially	Owned				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Execution Date,				4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			d 5)	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D) Price			Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common	Stock			08/08/2	2019				M ⁽¹⁾		33,865	A	\$6	1.93	54,758		D		
Common	Stock		08/08/2		2019	19			M ⁽¹⁾		21,970	A	\$	664		5,728		D	
Common	Stock			08/08/2	2019				S ⁽²⁾		55,835	D	\$70.6	5823 ⁽³⁾	20,893			D	
Common Stock													3,	3,752		I	By Issuer's 401(k) Plan Trustee		
		-	Table								sposed of,				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year) 4. Transaction Code (Instr.		5. Number of			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owner Form: Direct or Indi (I) (Inst	Ownership	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amo or Nun of Sha						
Stock Option (Right to Buy)	\$64	08/08/2019			M ⁽¹⁾			21,970		(4)	09/10/2020	Commor Stock	21,	970	\$0.0000	0.0000	0	D	
Stock Option (Right to	\$61.93	08/08/2019			M ⁽¹⁾			33,865		(5)	09/10/2021	Commor Stock	33,	865	\$0.0000	0.0000	0	D	

Explanation of Responses:

- 1. Exercise of stock options awarded under the issuer's incentive compensation 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 incentive compensation plan and the related tax withholding.
- 3. Weighted average price, as these shares were sold in multiple transactions at prices ranging from \$70.10 to \$71.01, 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, 2014 grant date.
- 5. Option became exercisable in one-third increments beginning on the first anniversary of the September 10, 2015 grant date.

/s/ Kristine Hutchinson, 08/12/2019 Attorney-in-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.