## 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
bligations may continue. See

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number	3235-0287							
Estimated average burden								
hours per resp	oonse: 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*						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [ CL ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
COOK IAN M						COLOTTE TIEMOLIVE CO [ CE ]								X	Direc	ctor	10% Owner		
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 10/30/2019								X	(specify )				
(Street) NEW YO			10022 Zip)		- 4. If	If Amendment, Date of Original Filed (Month/Day/Year)							6. Indiv Line) X	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - 1	Non-Deriv	ative/	Sec	uritie	s Ac	quire	ed, D	isposed o	of, or E	Benefic	ially	Owne	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/				Execution Date, 'ear) if any			3. Transaction Code (Instr. 8)  4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 and 1)				Beneficially Owned Follo		rities ficially ed 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 10/3				10/30/20	)19				S <sup>(1)</sup>		17,750	D	\$68.2	977(2)	977 <sup>(2)</sup> 995,0		D		
Common Stock														330,251		I	By 2018 GRAT		
Common Stock															1	25,532	I	By Issuer's 401(k) Plan Trustee	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date Execution Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)			4. Transa Code ( 8)	action	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	mber rative rities ired r osed )	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date			7. Title and Amount of Securities		8. Pr Deri Seci (Inst	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

- 1. This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by Mr. Cook as part of his long-term investment strategy for asset diversification and liquidity.
- 2. Weighted average price, as these shares were sold in multiple transactions at prices ranging from \$67.865 to \$68.605, 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.

/s/ Kristine Hutchinson, 11/01/2019 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.