FORM 4

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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|-------------|------|-------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| houre ner reenonee | 0.5 | | | | | | | |

| ection 16. Form 4 or Form 5 | |
|-----------------------------|--|
| ligations may continue. See | |
| struction 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 a | nd Address of | f Reporting Person* | | | | | | cker or Trac | | | | | | onship o | | g Pers | son(s) to Iss | uer | |
|--|----------------------|--|--|-------------------------|---|---|---|--------------------|--|--------------------|----------------------|--|---|---|---|---|--|---------------------------------------|--|
| <u>Edward</u> | <u>ds Lisa</u> | | | | <u> LOL</u> | GAIL | PAI | LMOLI | <u>/ E</u> | <u>CO</u> [C | L J | 100 | | Directo | , | | 10% Ov | vner | |
| | LGATE-PA | LMOLIVE COM | (Middle) MPANY | | 3. Date of Earliest Transaction (Month/Day/Year) 05/11/2020 | | | | | | | | | Officer (give title Other (specify below) | | | | specify | |
| 300 PAR | KK AVENU | E | | 4 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individ ne) | ndividual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) NEW YO | ORK N | Y | 10022 | | | | | | | | | X | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | |
| | | Tab | le I - Non-I | Derivati | ve Se | ecuritie | s Ac | quired, | Dis | posed o | of, or Be | neficia | lly O | wnec | i | | | | |
| Date | | | . Transaction ate Month/Day/Y | Execution Date, | | | tion Date, Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | Securiti Benefici Owned | | es Fo ially (D) Following (I) | | rm: Direct or Indirect (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | Reporte Transac (Instr. 3 | | tion(s) | | | Instr. 4) | |
| Common | mon Stock 05/11/2020 | | | | 20 | | A ⁽¹⁾ 1,946 A | | \$0.00 | 000 | 3, | 3,518 | | D | | | | | |
| | | T | able II - De | erivative e.g., puts | e Sec s, cal | urities Is, warr | Acq | uired, D | isp s, c | osed of | , or Ben ble secu | eficiall ırities) | y Ow | vned | | | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security | | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/Y | ate, 4. Tran | nsaction e (Instr | 5. Nun of Deriva Securi Acquii (A) or Dispos of (D) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 | | 6. Date Exercisable a Expiration Date (Month/Day/Year) | | | | 8. Pi Deri Seci (Inst | rice of ivative urity tr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | Cod | e V | (A) | (D) | Date Exercisabl | | Expiration Date | Title | Amount or Number of Shares | | | | | | | |
| Stock Option (Right to Buy) | \$69.83 | 05/11/2020 | | A ⁽²⁾ |) | 4,155 | | (3) | | 05/11/2028 | Common Stock | 4,155 | \$0. | .0000 | 4,155 | | D | | |

Explanation of Responses:

- 1. Annual director stock grant under the issuer's incentive compensation plan.
- 2. Annual director stock option grant under the issuer's incentive compensation plan.
- 3. Option becomes exercisable in equal annual installments over three years beginning on the first anniversary of the May 11, 2020 grant date.

/s/ Kristine Hutchinson, 05/13/2020 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.