FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGE	S IN BENEFICIA	AL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287
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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See

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* Kooyman John W					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 below) Chief of Staff							
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 09/12/2024															
(Street) NEW YORK NY 10022						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S		(Zip)	n-Deriv	vativ		curitio		nuired	Die	nosed o	of or Re	neficial	v Owne	<u>.</u>					
1. Title of Security (Instr. 3) 2. Tr			2. Trans Date (Month/	action	ar) if	2A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			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	Transa	Reported Transaction(s) (Instr. 3 and 4)			Instr. 4)		
Common Stock				09/12	2/2024				A ⁽¹⁾		1,536	A	\$0.000	00 4	0 4,736		D			
Common Stock			09/13	3/2024				F ⁽²⁾		280	D	\$105.7	/3 4	4,456		D				
Common Stock													1	11,378		I 2	Sy ssuer's 401(k) Plan Trustee			
		-	Table II -								osed of, onvertil			Owned						
Security (Instr. 3) or Exerc Price of Derivati	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) ce of rivative	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transactior Code (Instr. 8)		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		able and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		e (s I ally I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi _l (Instr. 4)		
					Code	v	(A)		Date Exercisal		Expiration Date	Title	Amount or Number of Shares							
Stock Option		09/12/2024			A ⁽³⁾		10,815		(4)		09/12/2032	Common	10,815	\$0.0000	10,815		D			

Explanation of Responses:

- 1. Restricted stock unit award granted under the issuer's incentive compensation plan. The restricted stock unit award vests in equal 1/3 installments on each of the first, second and third anniversary of the date of grant.
- 2. Withholding of shares for payment of tax liability incident to the vesting of restricted stock units under the issuer's incentive compensation plan.
- 3. Stock option award granted under the issuer's incentive compensation plan.
- 4. Option becomes exercisable in equal annual installments over three years beginning on the first anniversary of the September 12, 2024 grant date.

/s/ Kristine Hutchinson, Attorney-in-Fact

09/16/2024

** 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.