FORM 4

Check this box if no

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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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* Daniels Jennifer				2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]								(Check	tionship of Reportir all applicable) Director Officer (give title		ng Person(s) to Iss 10% Ow Other (s		vner	
	(Fir LGATE-PA K AVENU	LMOLIVE COM	Middle) MPANY		3. Date of Earliest Transaction (Month/Day/Year) 02/17/2022						X				low)			
(Street) NEW YORK NY 10022				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta		Zip)												1			
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			n 2 Ear) if	2A. Deemed Execution Date,		3. Ti	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an				5. Amount of Securities Beneficially Owned Following Reported		Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership	
							С	ode	v	Amount	(A) or (D)	Price		Transa	action(s) 3 and 4)	(Instr. 4)		(Instr. 4)
Common Stock 02/17/20			02/17/202	22	2		I	A ⁽¹⁾		16,797	A	A \$0.0000		56,935		D		
Common Stock 02/18/20			22	:			S ⁽²⁾		8,812 D		\$79.2	503 ⁽³⁾		8,123	D			
Common Stock												962		I	1	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 (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Trans Code 8)	action (Instr.	5. Nur of Deriva Secur Acqui (A) or Dispo of (D) (Instr. and 5	ative ities ired sed	Exp (Mo	oiration onth/Day	//Year)	Amo Secu Unde Deriv Secu 3 and	7. Title and Amount of Securities Underlying Derivative Security (Insi 3 and 4) Amou or Numb		vative (urity Str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	(D) irect	Beneficial Ownership (Instr. 4)
				Code	v	(A)			e ercisable	Expiration Date	Title	of Shares	.					

Explanation of Responses:

- 1. Represents vesting of a previously-granted performance-based restricted stock unit ("PBRSU") that was earned under the issuer's incentive compensation plan based on the achievement of performance goals for a completed performance period. The earned PBRSUs are settled solely in shares of Common Stock.
- 2. Sale of shares with proceeds delivered to the issuer for payment of tax liability incident to the vesting of PBRSUs under the issuer's incentive compensation plan. This transaction was effected pursuant to a Rule 10b5-1 trading plan.
- 3. Weighted average price, as these shares were sold in multiple transactions at prices ranging from \$79.11 to \$79.46, 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, Attorney-in-Fact

02/22/2022

** 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.