FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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OMB APPROVAL

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	OMB Number:	3235-0287							
	Estimated average burden								
	hours per response:	0.5							

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-

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(c). S	ee Instruction 1	10.																		
Name and Address of Reporting Person*     Daniels Jennifer						2. Issuer Name <b>and</b> Ticker or Trading Symbol COLGATE PALMOLIVE CO [ CL ]											n(s) to Is			
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY						3. Date of Earliest Transaction (Month/Day/Year) 12/03/2024								Officer (give title Other (specify below)  CLO and Secretary					specify	
300 PARK AVENUE						If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) NEW YORK NY 10022					7. II / VIII GITGITICITI, Date of Original Filed (Month/Day/Teal)									Line)  Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City)	(St	ate) (Ž	<u>Z</u> ip)																	
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or B	Benefic	cially	Own	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)					Execution Date,			3. 4. Securitie Disposed Code (Instr. 8)					Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock			12/03/2	2024	024		F <sup>(1)</sup>		168	D	\$94	4.61 62,4		2,490	D				
Common Stock															1	,739	I		By Issuer's 401(k) Plan Trustee	
		Tal	ole II -								osed of, convertib				Owne	d				
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution Date if any		ion Date,	4. Transaction Code (Instr. 8)		of		6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sec (Ins	i. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow For Dire or I (I) (	nership m: ect (D) ndirect Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)			Expiration Date	Title	Amount or Number of Shares							

## **Explanation of Responses:**

1. Payment of Medicare and income tax liability by withholding shares of stock from restricted stock units previously granted under the issuer's incentive compensation plan. The reporting person continues to hold the restricted stock units originally granted, less the amount of this required tax withholding.

> /s/ Kristine Hutchinson, Attorney-in-Fact

12/05/2024

\*\* Signature of Reporting Person

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.