SEC Form 4 FORM 4	UNIT	ED ST	ATE:	S SE	ECU	JRITI	ES A	ND	EXCHA	NGE	СОМ	ทเรร	SION				
								D.C. 2						0	ОМВ	APPRO	VAL
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See					IT OF CHANGES IN BENEFICIAL OWNERSHIP										OMB Number: 3235-0287 Estimated average burden hours per response: 0.5		
Instruction 1(b).		Fi	ed pur or	rsuant t r Sectio	to Sec on 30	ction 16((h) of the	a) of th Invest	e Secu ment (urities Exchan Company Act	ge Act of of 1940	1934			liours	per res	ponse.	0.5
1. Name and Address of Reporting Person [*] Daniels Jennifer													tionship o all applic Directo	able)	,		uer vner
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 08/05/2021								Х	below)	(give title CLO and	tle Other (specify below) and Secretary		
												6. Individual or Joint/Group Filing (Check Applicable Line)					plicable
(Street) NEW YORK NY			X Form fil									led by One Reporting Person					
(City) (State)	(Zip)		-										Form fi Person		e than	One Repo	ting
	Table I -	Non-Deri	vativ	e Sec	curit	ties A	cquire	ed, D	isposed o	of, or B	enefici	ally (Owned				
1. Title of Security (Instr. 3)	2. Transac Date (Month/Da	tion	Execution Date,		ed Date,	3. Transa Code (8)	action	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Benefici Owned F		nt of es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock	08/05/2021		1		M ⁽¹⁾		20,290	A	\$72.	2.99		,647		D			
Common Stock	08/05/2021				S ⁽²⁾		20,290	D	\$79.10	097 ⁽³⁾ 4		,357		D			
Common Stock												952			I	By Issuer's 401(k) Plan Trustee	
	Table								sposed of, , converti				wned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transactio Date (Month/Day/Y	ear) if any			action (Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ty (Ir	Price of erivative ecurity 1str. 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)
			Code	v	V (A) (D)		Date Exerc	isable	Expiration Date	Title	Amour or Numbe of Shares	ıber					
Stock Option (Right to Buy) S72.99 08/05/202		М				20,290	(4)		09/08/2022	Commo Stock	ⁿ 20,29	90	\$0.0000	40,580		D	

1. Exercise of stock options awarded under the issuer's incentive compensation plan. This transaction was effected pursuant to a Rule 10b5-1 trading plan.

2. Sale of shares with a portion of the proceeds delivered to the issuer for payment of the exercise price of options under the issuer's incentive compensation plan and the related tax withholding. 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 \$79.00 to \$79.235, 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.

4. Option became exercisable in one-third increments beginning on the first anniversary of the September 8, 2016 grant date.

/s/ Kristine Hutchinson, Attorney-in-Fact

08/09/2021

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 \ast 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.