FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	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 Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* Malcolm Gregory						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]								5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director 10% Owner Officer (give title Other (spec						
(Last)		3. Date of Earliest Transaction (Month/Day/Year) 02/15/2024								X	belov	v)	below) Controller		Specify					
C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NEW YORK NY 10022														X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication														
			Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																	
		Table	l - No	n-Deriva	ative	Secu	rities	Acc	uired	, Dis	posed of	, or E	Benefi	cially	Own	ed				
1. Title of Security (Instr. 3)			2. Transact Date (Month/Dat		Execution Date,		ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			3, 4 and Securities Beneficially Owned Following			Form: Direct		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) o	Price)	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock				02/15/2	02/15/2024				A ⁽¹⁾		1,191	A	\$0.0	0000	9,250		D			
Common Stock 02/1				02/15/2	2024				F ⁽²⁾		430	D	\$83	83.57		3,820	D			
Common Stock 02/18/2				2024	024			F ⁽³⁾		262	D	\$83	3.48	8,558		D				
Common Stock															8,027		I		By Issuer's 401(k) Plan Trustee	
		Та	ble II								osed of, convertib				Owne	d				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Y			3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expira (Month	tion D		7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4)		Der Sed (Ins	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form Direct or Ind (I) (Ins	t (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code		v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amoun or Numbe 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. Withholding of shares for payment of tax liability incident to the vesting of PBRSUs under the issuer's incentive compensation plan.
- 3. Withholding of shares for payment of tax liability incident to the vesting of restricted stock units under the issuer's incentive compensation plan.

/s/ Kristine Hutchinson, 02/20/2024 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.