SEC For	rm 4																		
FORM 4 UNITED S				D STA	TES	SEC		gton, D.C			٩N	GE CO	оммі	SSION			PRO	VAL	
Section 16. Form 4 or Form 5 obligations may continue. See					d pursua	TOF CHANGES IN BENEFICIAL OWNE pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940									Estim	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5			
1. Name and Address of Reporting Person <sup>*</sup> CAHILL JOHN T						2. Issuer Name and Ticker or Trading Symbol <u>COLGATE PALMOLIVE CO</u> [ CL ]								Relationship eck all appli X Directo	cable)	Reporting Person(s) to Is ble) 10% C			
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 05/13/2024								Officer below)	(give title	ve title Other below)		specify	
C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE (Street)					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
NEW YO	ORK N	Y	10022		Ruk	Rule 10b5-1(c) Transaction Indication								Perso	า				
(City) (State) (Zip)						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.													
		Tab	le I - No	n-Deriv	ative S	Secu	rities Acc	quired	, Dis	posed	of,	or Ben	eficial	ly Owned	k				
1. Title of Security (Instr. 3) 2. Trans Date (Month/MontManth/MontMontMontMontMontMonth/MontMonth/MontManth/M				ction ay/Year)	Exec if any	Deemed sution Date, / /th/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			4 and 5) Securities Beneficial Owned Fo		Form: Direct		7. Nature of Indirect Beneficial Ownership			
									v	Amount		(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 05/13				/2024	024		<b>A</b> <sup>(1)</sup>		1,905		Α	\$0.000	00 26	,890	D				
Common Stock														32	,433	I		By Trust	
		T	able II -				ties Acqu warrants,							Owned					
1. Title of Derivative Security (Instr. 3) Derivative Security Derivative Security Derivative Security Derivative Security Derivative Security Derivative Security Derivative Security Derivative Security Derivative Security Derivative Security Derivative Security			n Date,	Code (Instr.		of i	6. Date Exercisable and Expiration Date (Month/Day/Year)			Ai Se Ui De	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	o Own Forn Ily Direct or In (I) (Ir	ership n: ct (D) direct nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Date Exercisable

(3)

Expiration Date

05/13/2032

Title

Common Stock

Explanation of Responses:

\$94.46

Stock Option (Right to

1. Annual director stock grant under the issuer's incentive compensation plan.

05/13/2024

2. Annual director stock option grant under the issuer's incentive compensation plan.

3. Option becomes exercisable in equal annual installments over three years beginning on the first anniversary of the May 13, 2024 grant date.

Code V

**A**<sup>(2)</sup>

(A)

2,201

(D)

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

\*\* Signature of Reporting Person Date

Amount or Number of Shares

2,201

\$0.0000

2,201

05/15/2024

D

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.