FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	PPROVAL						
OMB Number:	3235-0287						
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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).

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. Name and Address of Reporting Person* HUNDMEJEAN MARTINA					2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
HUND	WIEJEAT	<u>N IVIANTIINA</u>												X Direc	tor		10% Ov	vner
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/13/2024								Office below	er (give title v)		Other (s below)	pecify
C/O COLGATE-PALMOLIVE COMPANY				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
300 PAR	K AVENU	E												,	filed by One	e Repo	orting Perso	n
(Street) NEW Y	ORK N	Y	10022											Form Pers	filed by Mo	re thar	n One Repo	rting
					- Ri	ule	10b5-	-1(c) Trans	act	tion Inc	dication						
(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-Deri	vative	e Se	curitie	s Ac	quired,	Dis	posed o	of, or Be	neficia	lly Owne	d			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date,		Transaction Disposed Of Code (Instr.		ies Acquired (A) or Of (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price	Transa	ed ction(s) 3 and 4)			Instr. 4)
Common Stock 05/13/2				3/2024	2024		A ⁽¹⁾		1,905	A	\$0.00	00 1	10,525		D			
		7	able II -									, or Ben ble secu		/ Owned		,	,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	Date, Trans Code		of Deriva Securi Acquir (A) or Dispos of (D)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	i Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares					
Stock Option (Right to	\$94.46	05/13/2024			A ⁽²⁾		2,201		(3)	(05/13/2032	Common Stock	2,201	\$0.0000	2,201		D	

Explanation of Responses:

- 1. Annual director stock grant under the issuer's incentive compensation plan, credited to a stock unit account pursuant to the issuer's incentive compensation plan.
- 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.

/s/ Kristine Hutchinson, Attorney-in-Fact

** Signature of Reporting Person

05/15/2024

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.