FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* TANGNEY MICHAEL J							2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Director Officer (give title below) Director below) Director below below					
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 09/01/2006										P Pres. (below) e Latin A		
(Street) NEW YORK NY 10022					_	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Si	-	(Zip)																	
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					saction	ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (3. Transaction Code (Instr.		4. Securities Acquired (A)			5. Amour Securitie Beneficia Owned F	nt of es ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	Price	e	Reported Transact (Instr. 3 a	ion(s)		(Instr. 4)	
Common Stock 09/01						2006		M ⁽¹⁾		28,852	2 A	\$60	0.02	389	,870	D				
Common Stock 09/01					1/200	1/2006					52	D	\$60	0.35 389		,818		D		
Common Stock 09/01/					1/200	./2006					28,695	5 D \$60		0.35	361,123(4)			D		
Common Stock															18,	.397		I Z	By ssuer's 401(k) Plan Trustee	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	Code (Instr.				6. Date Exercisa Expiration Date (Month/Day/Yea		•	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		S	. Price of perivative pecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ily I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal	ole E	Expiration Date	Title	Amou or Numb of Share	er	r					
Stock Option (Right to Buy)	\$60.02	09/01/2006			M ⁽¹⁾			28,852	08/06/200	01 (09/05/2006	Common Stock	28,85	\$52 \$0		0		D		

Explanation of Responses:

- 1. Exercise of stock options awarded under the issuer's employee stock option plan.
- 2. Payment of tax liability by delivering or withholding shares of stock incident to the exercise of the option under the issuer's employee stock option plan.
- 3. Payment of exercise price of stock option by delivering or withholding shares of stock incident to the exercise of the option under the issuer's employee stock option plan.
- 4. As a result of the reported transactions, the reporting person's Common Stock ownership has increased by 105 shares.

Remarks:

Nina D. Gillman by power of <u>attorney</u>

09/06/2006

** 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.