FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

l	OMB APPRO	VAL
l	OMB Number:	3235-0287
l	Estimated average burde	en
l	hours per response:	0.5

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*  Williamson Francis M  (Last) (First) (Middle)  COLGATE-PALMOLIVE COMPANY  300 PARK AVENUE					Susuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [ CL ]      Date of Earliest Transaction (Month/Day/Year) 05/04/2011								heck all appli Direct	cable) or	ig Pers	10% Owner	
													helow)	below) `		Other (specify below)	
(Street) NEW YORK NY 10022					Line) X Form Form									iled by One Reporting Person			
(S	tate)	(Zip)															
	Tab	le I - No	on-Deri	vativ	e Sec	curit	ies Ac	quired	l, Di	sposed o	f, or Be	neficia	lly Owned	t e			
=: :::::: o: cocu.::; (:::ci.:: c)		2. Transaction Date (Month/Day/Ye		Execution Date, Year) if any		n Date,	3. Transaction Code (Instr. ) 8)					5) Securiti Benefic Owned	es ially Following	Form (D) or	: Direct · Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Stock			05/04/	04/2011				<b>M</b> <sup>(1)</sup>		22,000	A	\$56.675		5,074		D	
Common Stock		05/04/	05/04/2011				M <sup>(1)</sup>		23,500	A	\$53.4	\$53.455			D		
Common Stock		05/04/2011					<b>F</b> <sup>(2)</sup>		35,119	D	\$85.6	\$85.65 103			D		
Common Stock			05/05/2011					S <sup>(3)</sup>		1,628	D	\$85.12	\$85.1243			D	
Common Stock												22,087			I 4	By Essuer's 401(k) Plan Trustee	
	-	Гable II											/ Owned				
Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any			ransaction of ode (Instr. Derivative		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)	derivative Securities Beneficia Owned Following Reported	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or	1				
\$56.675	05/04/2011			M <sup>(1)</sup>			22,000	09/17/2	004	09/17/2011	Common Stock	22,000	\$0	0		D	
\$53.455	05/04/2011			M <sup>(1)</sup>			23,500	09/08/2	800	09/08/2011	Common Stock	23,500	\$0	0		D	
	(F TE-PALMC IK AVENUI  ORK N (S Security (Inst Stock	(First) TE-PALMOLIVE COMPANER AVENUE  DRK NY  (State)  Tab  Security (Instr. 3)  Stock  Stock	(First) (Middle) TE-PALMOLIVE COMPANY EK AVENUE  ORK NY 10022  (State) (Zip)  Table I - No Security (Instr. 3)  Stock Stock Stock Stock Stock Stock Stock Stock Stock  Stock Stock  Stock  Stock  Stock Stock  Stock Stock  Stock Stock  Stock S	(First)	Column	COLG   Color   Color	COLGAT	COLGATE PAL	COLGATE PALMOL   Column	COLGATE PALMOLIVE	COLGATE PALMOLIVE CO   CI	COLGATE PALMOLIVE CO   CL	COLGATE PALMOLIVE COL   CL   CC   CL	Collegate Pal.MoLive CO   Cl   Cl   Cl   Cl   Cl   Cl   Cl	COLGATE PALMOLIVE CO [ cl. ]   Collect all applicable   Collect (gibe tile below)   VP Fin. 8.Str.	COLGATE PALMOLIVE CO [ C1 ]   Check all applicability	COLGATE PALMOLIVE CO   CL     Check all applicable)   Director   10% Ownership   Control   National Palmolive Company   Nature   Nature

- 1. Exercise of stock options awarded under the issuer's employee stock option plan.
- 2. The exercise price of the options and related withholding requirement was satisfied by the Company's withholding shares otherwise deliverable upon exercise of the options.
- 3. Sale of shares (with proceeds delivered to the Company) for payment of tax liability above minimum required statutory withholding (but not in excess of full applicable statutory tax rates) incident to the exercise of the option under the issuer's employee stock option plan.

## Remarks:

Nina Huffman by Power of 05/06/2011 Attorney

\*\* Signature of Reporting Person

Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).