FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-02								

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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 S	Sect	tion 30(h) of the	Investr	nent C	Com	pany Act	of 19	940							
1. Name and Address of Reporting Person* Thompson Neil					2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]												p of Reportin blicable) ctor	ng Pe	rson(s) to Is		
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 12/02/2010										X Officer (give title below) Pres&CEO Hi				Other (specify below) ll's Pet Nutrition	
(Street) NEW YORK NY 10022 (City) (State) (Zip)					4. If	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					on
		Tabl	e I - Nor	n-Deriv	ative	Se	ecurit	ies Ac	quire	d, D	isp	osed o	f, o	r Be	nefic	ially	Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				action	ction 2A. Deemed			3. Trai	3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			ed (A) o	o) or 5. A 4 and Sec Ber Ow		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Cod	le V		Amount (A) or (D)		Pric	е	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 12/02				2/2010	2010			F ⁽¹)		317	317 D \$		\$7	7.76	2	21,998		D		
Common Stock																		409		I	By Issuer's 401(k) Plan Trustee
		Та	able II - I									sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed		4. Transaction Code (Instr. 8)		5. I on of r. De Se Ac (A) Dis of	5. Number of		6. Date Exercis Expiration Date (Month/Day/Yea		able and	7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		d f s g	8. Pi Deri Seci (Inst	Price of ivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						v	(A)	(D)	Date Exerc	sable		Expiration Date	Titl	OI N	umber	er					

Explanation of Responses:

1. Payment of Medicare and income tax liability by withholding shares of stock from restricted shares previously granted under the issuer's Executive Incentive Compensation Plan. The reporting person continues to hold the restricted shares originally granted, less the amount of this required tax withholding.

Remarks:

Nina D. Gillman by power of 12/06/2010 <u>attorney</u>

** 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.