FORM 4

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
| | | |

| Check this box if no longer sub Section 16. Form 4 or Form 5 | ject to | STATEMENT |
|---|---------|-----------|
| | | |

T OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Nelson Rosemary | | | | | | 2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] | | | | | | | | (Check | all app Dired | olicable) ctor | g Person(s) to Is 10% C | wner |
|---|-----------------|------|---------------|----------------|---|---|--------|--|---|---|---|---------------|---------------------|--|---|---|--|---|
| (Last) (First) (Middle) COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/24/2011 | | | | | | | | X | Officer (give title below) VP-Dep Gen Counsel, Operations | | |)`` | |
| (Street) NEW YC | ORK N | Ý 1 | .0022 Zip) | | 4. 1 | f Ame | endmen | t, Date (| of Original Filed (Month/Day/Year) | | | | | 6. Indiv Line) X | | | | |
| | | Tabl | e I - No | on-Deriv | /ative | e Se | curiti | es Ac | quired | d, Di | sposed o | f, or E | Benefic | ially | Owne | ed | | |
| 1. Title of Security (Instr. 3) 2. Tra | | | 2. Transac | ransaction | | 2A. Deemed Execution Date, ear) if any | | 3. 4. S | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar | | | 5. An Secu | | ount of ities ficially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) oi (D) | Price | | Trans | action(s) 3 and 4) | | (11150.4) |
| Common Stock 02/24 | | | | 02/24/ | 2011 | | | | A ⁽¹⁾ | | 3,174 | A | \$ | \$0 | | 19,399 | D | |
| Common Stock | | | | 02/27/2011 | | | | F ⁽²⁾ | | 521 | D | \$78 | \$78.12 | | 18,878 | D | | |
| Common | Common Stock 02 | | | | /2011 | | | | S ⁽³⁾ | | 150 | D | \$78. | \$78.2044 | | 18,728 | D | |
| Common Stock | | | | | | | | | | | | | | | | 1,972 | I | By Issuer's 401(k) Plan Trustee |
| | | Та | ble II - | | | | | | | | osed of, convertib | | | | wned | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) | | | on Date, | Code (Inst | | 5. Number ion of | | 6. Date Exerci Expiration Da (Month/Day/Yo | | ate | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | Deri Sec (Ins | rice of vative urity tr. 5) | ve derivative Securities | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | • | Code | Code V (A) (D) | | Date Exercisable | | Expiration Date | Amour or Number of Title Shares | | 1 | | | | | | | |

Explanation of Responses:

- 1. Restricted stock award granted under the Long-Term Global Growth Program of the issuer's Executive Incentive Compensation Plan.
- 2. Payment of tax liability by withholding shares of stock from restricted shares vesting under the issuer's Executive Incentive Compensation Plan.
- 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 vesting of a restricted stock award under the issuer's Executive Incentive Compensation Plan.

Remarks:

Nina R. Huffman by power of attornev

02/28/2011

** 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.