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
Instruction 1(b).

## STATEMENT 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

1. Name and Address of Reporting Person*  HENDRY ANDREW D						2. Issuer Name and Ticker or Trading Symbol  COLGATE PALMOLIVE CO [ CL ]								Officer (circo title Other			L0% Ow		
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 11/02/2010								X Officer (give title Offier (specify below)  Sr VP, Gen Counsel & Secretary					
(Street) NEW YORK NY 10022					_   4.	4. If Amendment, Date of Original Filed (Month/Day/Year)     6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person												n	
(City)	(S		(Zip)	Davi	4:	- 0-		A.		Di-		f av Da		l O					
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					action	ar) i	2A. Dec Execut if any	A. Deemed execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A)		5. Amou Securitie Benefici Owned F	nt of es ally Following	6. Owners Form: Dir (D) or Ind (I) (Instr. 4	ect ( irect (	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reporter Transact (Instr. 3	ion(s)			(Instr. 4)	
Common Stock 11/02/						2010			S <sup>(1)</sup>		1,000	D	\$77.6	139,382		D			
Common Stock 11/02/					2/2010	/2010			M <sup>(2)</sup>		47,500	) A	\$56.67	75 186	5,882	D			
Common Stock 11/02/					2/2010	0			F <sup>(3)</sup>		41,122	2 D	\$78.0	5 145,760		D			
Common Stock						_								3,	761	I		By Son <sup>(4)</sup>	
Common Stock													2	284		I S			
		7	Table II -								osed of, converti			Owned					
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/Da	Date,	4. Transaction Code (Instr. 8)				6. Date E Expiratio (Month/E	n Dat		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owi Ford Ily Dire or II (I) (I	nership m: ect (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Stock Option (Right to	\$56.675	11/02/2010			<b>M</b> <sup>(2)</sup>			47,500	09/17/20	004	09/17/2011	Common Stock	47,500	\$0	0		D		

## **Explanation of Responses:**

- 1. The sale reported in this Form 4 is effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on May 17, 2010, for retirement planning purposes.
- 2. Exercise of stock options awarded under the issuer's employee stock option plan.
- 3. 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.
- 4. The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

## Remarks:

Nina D. Gillman by power of attornev

11/04/2010

\*\* 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.