FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |           |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |

0.5

hours per response:

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   | Secti   | ion 30(h)       | of the I | nvestmer  | nt Con  | npany Act           | of 194   | 10             |                           |  |   |   |   |            |  |
|---|---|--|--|---------|--|---|-----------------|----------|---|---|---------------------|--|----------------|---------------------------|--|---|---|---|------------|--|
| 1. Name and Address of Reporting Person* FILUSCH EDWARD J             |   |  |  |         | 2. Issuer Name and Ticker or Trading Symbol  COLGATE PALMOLIVE CO [ CL ] |   |                 |          |   |   |                     |  |                |                           | tionship of Reportin<br>all applicable)<br>Director<br>Officer (give title   |   | 10% C   |   |            |  |
| (Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE |   |  |  |         |  | 3. Date of Earliest Transaction (Month/Day/Year) 02/03/2009 |                 |          |   |   |                     |  |                |                           |  |   | elow) below) Vice President and Treasurer   |   |            |  |
| (Street) NEW YORK NY 10022 (City) (State) (Zip)                       |   |  |  |         |  | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |                 |          |   |   |                     |  |                |                           | S. 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 - Noi                                    | n-Deriv | ative  | Se  | curitie         | es Aco   | quired,   | Dis   | posed o             | f, or  | Ben            | efici                     | ally (   | Owne  | ed  |   |            |  |
| 1. Title of Security (Instr. 3)  2. Transar Date (Month/Da            |   |  |  | ar)     | 2A. Deemed<br>Execution Date,<br>f any<br>(Month/Day/Year)               |   | Transaction Dis |          | Disposed  | Securities Acquired (A)<br>sposed Of (D) (Instr. 3, |                     |  |                | Securi<br>Benefi<br>Owner | cially<br>d Following  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |            |  |
|   |   |  |  |         |  |   |                 |          | Code  | v   | Amount (A) or (D)   |  | Price          | •                         | Reported<br>Transaction(s)<br>(Instr. 3 and 4)   |   |   |   | (111511.4) |  |
| Common Stock 02/0   |   |  | 02/03  | /2009   |  |   |                 | S        |   | 486   |                     | D  | \$65           | 5.24                      | 15,329   |   | D   |   |            |  |
| Common Stock  |   |  |  |         |  |   |                 |          |   |   |                     |  |                |                           |  |   | 616   | I   |            | By<br>Issuer's<br>401(k)<br>Plan<br>Trustee                        |
|   |   | Та   |  |         |  |   |                 |          |   |   | sed of,<br>onvertib |  |                |                           |  | vned  |   |   |            |  |
| L. Title of<br>Derivative<br>Security<br>(Instr. 3)                   | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deem<br>Execution<br>if any<br>(Month/Da | Date,   | 4.<br>Transaction<br>Code (Instr.<br>8)                                  |   | n of            |          | 6. Date Exerciss<br>Expiration Date<br>(Month/Day/Yea |   | е                   | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr<br>and 4) |                | I<br>nstr. 3              |  | ivative<br>urity<br>tr. 5)  | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s<br>(Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | )<br>ect   | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|   |   |  |  |         | Code   | v   | (A)             | (D)      | Date<br>Exercisa                                      |   | Expiration<br>Date  | Title  | or<br>Nu<br>of | mber<br>ares              |  |   |   |   |            |  |

**Explanation of Responses:** 

Remarks:

Nina D. Gillman by power of attorney

02/05/2009

\*\* 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.