FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [D.C. 20549
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Check this box if no longer subject to	ST
Section 16. Form 4 or Form 5	
obligations may continue. See	

ATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Section 16. I obligations n 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* Woodson Gregory P					2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]								5. Relationship of Reporting Person(s) to Issu (Check all applicable) Director 10% Ow				ner				
(Last) (First) (Middle) COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 05/08/2009									ficer (give title low) Other (s below) P-Chief Ethics & Compliance			·				
(Street)	ORK N	Y	10022		_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								e) X Form f	filed by One	e Repo	ng (Check Applicable porting Person an One Reporting				
(City)	(Si	tate)	(Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)		2. Transa Date (Month/D		Ex f) if a	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3,			Benefic Owned	es ially Following	Form (D) or	n: Direct or Indirect	7. Nature of Indirect Beneficial Ownership					
					(Code	v	Amount	(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			Instr. 4)					
Common	Stock			05/08/	/2009				M ⁽¹⁾		8,000	A	\$55.65	63 36	,792		D				
Common Stock		05/08/2009				M ⁽¹⁾		22,500	A	\$56.56	55 59	,292		D							
Common Stock		05/08/2009					F ⁽²⁾		28,804	D	\$61.8	2 30	,488		D						
Common Stock		05/11/2009					S ⁽³⁾		271	D	\$61.96	47 30	,217		D						
Common Stock													7,	.965		I	By Issuer's 401(k) Plan Trustee				
		-	Table II	- Deriva (e.g.,	ative puts,	Secu calls	ıritie S, Wa	es Acqı arrants	uired, , optic	Disp ons,	oosed of, convertil	or Bend ble secu	eficially irities)	Owned							
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date curity or Exercise (Month/Day/Year) if any		n Date,	Date, Transacti Code (Ins				6. Date Expirati (Month/	on Da		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	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 Exercis	able	Expiration Date	Title	Amount or Number of Shares								
Stock Option (Right to Buy)	\$55.6563	05/08/2009			M ⁽¹⁾			8,000	09/09/2	002	09/09/2009	Common Stock	8,000	\$0	0		D				
Stock Option (Right to Buy)	\$56.565	05/08/2009			M ⁽¹⁾			22,500	09/11/2	006	09/11/2009	Common Stock	22,500	\$0	0		D				

Explanation of Responses:

- 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 D. Gillman by power of

05/12/2009

attorney

** 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.