FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

| STATEMENT | OF CHANGES II | N 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* Skala Justin (Last) (First) (Middle) COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE | | | | | 2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] | | | | | | | | | all applic | cable) or | ting Person(s) to Issuer 10% Owner | | vner | | |
|---|----------|--|----------------|---|---|--|------------------|--|---------------------------|---------------|---|-----------------|--|---|--|---|--|--|--|--|
| | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/14/2009 | | | | | | | | | below) | | | | ´ I | | |
| (Street) NEW YO | ORK N | Y | 10022 (Zip) | | 4. 11 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | i. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| | | Tab | le I - No | on-Deriv | vative | Sec | urit | ies Ac | quirec | l, Di | sposed o | of, or Be | neficia | lly (| Owned | l | | | | |
| 1. Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a | | | nd 5) Securit Benefic Owned | | es ially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | | Reporte Transac (Instr. 3 | tion(s) | | | (Instr. 4) | | | |
| Common Stock | | | 08/14/ | /14/2009 | | | | M ⁽¹⁾ | | 6,250 | A | \$56.5 | 65 | 48 | ,331 | | D | | | |
| Common Stock | | 08/14/ | 4/2009 | | | | F ⁽²⁾ | | 4,928 | D | \$71.7 | 75 | 43 | ,403 | | D | | | | |
| Common | Stock | | | 08/17/ | 2009 | | | | S ⁽³⁾ | | 569 | D | \$71.11 | 1108 42,834 D | | | D | | | |
| Common Stock | | | | | | | | | | | | | | 5 | 61 | | I | By Issuer's 401(k) Plan Trustee | | |
| | | Т | able II | | | | | | | | posed of converti | | | y O | wned | | | , | | |
| Derivative Conversion Date Exe Security or Exercise (Month/Day/Year) if ar | | if any | ion Date, Tra | | ransaction ode (Instr. | | n of | | Exerci on Da Day/Yo | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | De Se | rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amount or Number of Shares | | | | | | | |
| Stock Option (Right to | \$56.565 | 08/14/2009 | | | M ⁽¹⁾ | | | 6,250 | 09/11/2 | 006 | 09/11/2009 | Common Stock | 6,250 | | \$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 <u>attorney</u>

08/18/2009

** 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.