FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| STATEMENT | OF (| CHANGES | IN BENEFICIA | AL. | OWNERSHIP |
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| l | hours per response: | 0.5 |

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 Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* HICKEY DENNIS J (Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE | | | | | 3. E | Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] Just of Earliest Transaction (Month/Day/Year) 09/08/2008 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | 5. Relationship of Reporting (Check all applicable) Director X Officer (give title below) VP, Corporate 6. Individual or Joint/Group F | | | | 10% C Other (below) Controller | wner (specify |
|--|--|--|--|------------------------------|-----------------|--|--|------------|--|------------------|---|--------|-------------------------------------|---|---|--|---|--|--|--|---|
| (Street) NEW YORK NY 10022 (City) (State) (Zip) | | | | | | The monancing bate of original Field (monanbay) feat) | | | | | | | | | | _ine) X | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Execution Date, | | | , [| 3. Transaction Code (Instr. 8) 4. Securities Acquisities Acquisiti | | | | | | Securities Beneficially Owned Following | | Forn (D) c | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | [| Code | v | Amount | | (A) or (D) | Pric | Tra | | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) |
| Common | Stock | | | 09/08 | /2008 | 008 | | | | F ⁽¹⁾ | | 673 E | | D | \$79 | 9.25 | 98,463 | | | D | |
| Common Stock | | | | | | | | | | | | | | | | 3,7 | | 3,749 | | I | By Issuer's 401(k) Plan Trustee |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | ative or Exercise Price of Derivative Security Conversion or Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) | | | 4. Transa Code (8) | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Exp (Mo | piratior | n Date | | | f g nstr. 3 nount umber | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | F C C | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

1. Payment of tax liability by withholding shares of stock from award of restricted shares vesting under the issuer's stockholder-approved Executive Incentive Compensation Plan. The overall net effect of the vesting of restricted shares, after the withholding of shares to pay income taxes associated with such vesting reported on this Form, was to increase Mr. Hickey's non-restricted holdings (i.e., common shares held outright) of Colgate stock.

Remarks:

Nina D. Gillman by power of attorney

09/10/2008

** 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.