FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

heck this box if no longer subject to
ection 16. Form 4 or Form 5
bligations may continue. See
otruction 1/h)

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

Name and Address of Reporting Person* Groener David R						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]									k all ap _l Dire	olicable)		ssuer Owner (specify
	(Fii TE-PALMO K AVENUI	LIVE COMPAN	Middle)			ate of 08/20		st Trans	ansaction (Month/Day/Year)						belo	below) below) VP-Global Supply Chain)``
(Street) NEW YC			10022 Zip)		4. If	Amer	ndment,	Date o	of Origin	al File	d (Month/Da	ay/Year)		6. Indi Line)				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Da			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				5. Amount of Securities Beneficially Owned Followin Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) o (D)	r _{Pri}	ce	Trans	action(s) 3 and 4)		(Instr. 4)	
Common Stock 0				09/08/2	09/08/2008						448	D	\$	79.25	.25 36,970		D	
Common	Common Stock 09.			09/09/2	9/09/2008						133	D	\$7	9.1369	3	36,837	D	
Common Stock																6,852	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)	Title of 2. Serious Date Conversion Date Conversion Courity Or Exercise (Month/Day/Year) 3A. Deemed Execution Date, if any				I. Transaction Code (Instr.		5. Number		Exerc ion Da /Day/Y	sable and 7. Title and te Amount of		Der Sed (Ins	Price of ivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	/ (A) (D)		Date Exercisable		Expiration Date	Title	Amount or Number of tle Shares						

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 and sale of shares to pay income taxes associated with such vesting reported on this Form, was to increase Mr. Groener's non-restricted holdings (i.e., common shares held outright) of Colgate stock.
- 2. 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) resulting from vesting of award of restricted shares under the Company's stockholder-approved Executive Incentive Compensation Plan. The overall net effect of the vesting of restricted shares, after the withholding and sale of shares to pay income taxes associated with such vesting reported on this Form, was to increase Mr. Groener's non-restricted holdings (i.e., shares held outright) of Colgate common stock.

Remarks:

Nina D. Gillman by power of <u>attorney</u>

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.