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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
OMB Number: 3235-02								
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person [*] Skala Justin			2. Issuer Name and Ticker or Trading Symbol <u>COLGATE PALMOLIVE CO</u> [CL]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE (Street) NEW YORK NY 10022		,	3. Date of Earliest Transaction (Month/Day/Year) 11/12/2009	X	Officer (give title below) Pres. Colgate Gre	Other (specify below) tter Asia		
		10022	4. If Amendment, Date of Original Filed (Month/Day/Year)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Table	Table 1- Non-Derivative Securities Acquired, Disposed of, or Derienciary Owned									
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) (Month/Day/Year) 2A. Deemed Execution Date if any (Month/Day/Year)		3. Transaction Code (Instr.4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)8)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	11/12/2009		M ⁽¹⁾		4,000	A	\$64.75	46,306	D	
Common Stock	11/12/2009		F ⁽²⁾		3,218	D	\$80.5	43,088	D	
Common Stock	11/13/2009		S ⁽³⁾		337	D	\$80.9977	42,751	D	
Common Stock								563	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)											
2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exer Expiration E (Month/Day/	Date Year)	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Expiration

01/13/2010

Title

Commor

Stock

Date

Buy)
Explanation of Responses:

\$64 75

1. Exercise of stock options awarded under the issuer's employee stock option plan.

11/12/2009

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.

(A) (D)

4 000

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.

Date

Exercisable

01/13/2003

Remarks:

Stock Option

(Right to

1. Title of

Derivative Security (Instr. 3)



Amount or Number

4,000

\$0

of Shares

11/16/2009

0

D

** 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.

Code V

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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.