FORM 5

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OWNERSHIP

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OMB APPROVAL									
OMB Number:	3235-036								
Estimated average I	burden								

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hours per response:

\cup	obligations may continue. See Instruction 1(b).
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Form 3 Holdings Reported.

Form 4	Transactions F	Reported.	File	ed pursuant to or Section	Section 30(h)	on 16(a of the	a) of the Invest	e Secur ment Co	ities Exchar ompany Act	nge Act of 1940	of 1934)					
1. Name and Address of Reporting Person* MARK REUBEN					2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) C/O COL 300 PARI		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2005							X Officer (give title below) Other (specify below) Chairman and CEO							
(Street) NEW YORK NY 10022				4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St		^{Zip)} ====================================	vative Sec	uritie	es Ac	auire	ad Die	snosed o	of or	Renefici	ally Own	2d			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)						6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership		
			(montain bay)	(Monthibayrical)					(A) or (D) Price		Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I) (Instr. 4)		(Instr. 4)	
Common Stock 12/19/2005			12/19/2005		G		3	21	,850	D	(1)	6,14	6,149,257		D	
Common Stock											126,509			I	By Issuer's 401(k) Plan Гrustee	
		Ta	ble II - Derivat (e.g., p	ive Secur uts, calls,												
1. Title of Derivative Security (Instr. 3)	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)	of Deriv Secu Acqu (A) or Dispo	ivative urities uired or coosed or coosed or 5) tr. 3, 4 5)		Date Exercisable and xpiration Date Month/Day/Year) ate Expiration pate exercisable		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amour or Numbe of		Reporter Transact (Instr. 4)		e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)

Explanation of Responses:

1. Bona fide gifts

Remarks:

Andrew D. Hendry by power

02/10/2006

of 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.