### FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 205	19
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Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHAN
obligations may continue. See	Filed nursuant to Costion
Instruction 1(b).	Filed pursuant to Section :

## GES 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

1. Name and Address of Reporting Person*  PATRICK STEPHEN C					2. Issuer Name and Ticker or Trading Symbol  COLGATE PALMOLIVE CO [ CL ]								(Check	tionship of Reporting all applicable) Director Officer (give title		10% C		
	`	LMOLIVE COM	Middle) IPANY		3. Date of Earliest Transaction (Month/Day/Year) 09/10/2007								X	belov	w) ``	below) ncial Officer		
(Street)  NEW YC			.0022		4. If	Amen	dment,	Date o	of Original Filed (Month/Day/Year)					6. Indiv Line) X	ridual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
(City)	(Si		Zip) 	n-Deriv	ative	Sec	uritie	s Ar	nuirec	l Die	sposed o	of or B	enefi	rially	Own	2d		
1. Title of Security (Instr. 3)		2. Transaction Date		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			<del></del>	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	•	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock			09/10/2007				F <sup>(1)</sup>		2,178	D	\$6	6.69	.69 191,8		D			
Common	Stock			09/11/2	007				<b>S</b> <sup>(2)</sup>		706	D	\$67	.2333	1	191,164 D		
Common Stock													2,707		I	By Issuer's 401(k) Plan Trustee		
		Та	ble II -								osed of, convertib				wned			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, ar) if any			ransaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exerc ion Da /Day/Y		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Seci (Inst	rice of vative urity ir. 5)	tive derivative ty Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or Numbe of 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. Patrick'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. Patrick's non-restricted holdings (i.e., shares held outright) of Colgate common stock.

### Remarks:

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

09/1<u>2/2007</u>

\*\* 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.