FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 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

1. Name and Address of Reporting Person* <u>HENDRY ANDREW D</u>						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]								5. Relationship of Reportir (Check all applicable) Director			ng Person(s) to Issuer 10% Owner Other (specify		
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 06/19/2012								X Officer (give title below) be Chief Legal Officer &Sec					
(Street) NEW YORK NY 10022					_ 4. If .	4. If Amendment, Date of Original Filed (Month/Day/Year)									ividual or Joint/Group Filing Form filed by One Repo Form filed by More than Person			1	
(City)	(S	tate)	(Zip)											Ferson					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Exec if an	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,		d (A) or r. 3, 4 and	Benefic Owned	es ially Following	Form:	Direct Indirect Etr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			Instr. 4)		
Common Stock 06/19/					/2012				M ⁽¹⁾⁽³⁾		2,000	2,000 A S		15 12	121,255		D		
Common Stock 06/1				06/19	/2012				S ⁽²⁾⁽³⁾		2,000	D	\$101.	64 11),255		D		
Common Stock 06/1				06/19	/2012				S ⁽³⁾		1,000	D	\$101.	64 11	3,255	D			
Common Stock														3,	3,761		I 1	By Son ⁽⁴⁾	
Common Stock														;	744			By Spouse ⁽⁴⁾	
Common Stock														1,	276		I 4	By (ssuer'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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,	4. Transact Code (In 8)				6. Date Expiration (Month/D	n Date	•	7. Title and Amount of Securities Underlying Derivative (Instr. 3 and	f g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)		Date Exercisal		Expiration Date	Title	Amount or Number of Shares	nber					
Stock Option (Right to Buy)	\$68.15	06/19/2012			M ⁽¹⁾⁽³⁾			2,000	09/12/20	10 (09/12/2013	Common Stock	2,000	\$0	46,000	0	D		

Explanation of Responses:

- 1. Exercise of stock options awarded under the issuer's employee stock option plan.
- 2. Sale of shares with a portion of the proceeds delivered to the issuer for payment of the exercise price of options under the issuer's employee stock option plan and the related tax withholding.
- 3. This transaction was effected pursuant to a Rule 10b5-1 trading plan.
- 4. The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

Remarks:

Joyce McCarthy by power of attorney

06/20/2012

** 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.