SEC F	orm 4
-------	-------

 $\square$ 

## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

# 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:	3235-0287							
Estimated average bu	rden							
hours por rosponso:	0 5							

1. Name and Address of Reporting Person* Groener David R			2. Issuer Name and Ticker or Trading Symbol <u>COLGATE PALMOLIVE CO</u> [ CL ]	(Check	tionship of Reporting Pe all applicable) Director Officer (give title	erson(s) to Issuer 10% Owner Other (specify
(Last) (First) (Middle) COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE (Street) NEW YORK NY 10022 (City) (State) (Zip)			3. Date of Earliest Transaction (Month/Day/Year) 11/13/2009		below) VP-Global Sup	below)
		10022 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	ridual or Joint/Group Fili Form filed by One Re Form filed by More the Person	porting Person

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					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	11/13/2009		<b>M</b> <sup>(1)</sup>		7,500	A	\$48.0625	51,610	D		
Common Stock	11/13/2009		F <sup>(2)</sup>		5,577	D	\$81.49	46,033	D		
Common Stock	11/16/2009		<b>S</b> <sup>(3)</sup>		308	D	\$82.1562	45,725	D		
Common Stock	11/16/2009		S		1,615	D	\$82.23	44,110	D		
Common Stock								7,050	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)

	( <b>3</b> -, <b>P</b> , <b>-</b> , <b>-</b> , <b>-</b> , <b>-</b> ,														
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. Transa Code ( 8)		1 of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of 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)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$48.0625	11/13/2009		<b>M</b> <sup>(1)</sup>			7,500	09/14/2003	09/14/2010	Common Stock	7,500	\$0	7,500	D	

#### Explanation of Responses:

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

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.

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.

## **Remarks:**

Nina D. Gillman by power of <u>attorney</u> <u>11/</u>

11/17/2009

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $\ast$  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.