Edgar Filing: Dolan Victoria L - Form 4

Form 4											
December 14, 2011 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). UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								OMB Number: Expires: Estimated a burden hou response			
(Print or Type F	Responses)										
1. Name and Address of Reporting Person [*] Dolan Victoria L			2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(M			(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 12/12/2011				Director 10% Owner X Officer (give title 0ther (specify below) 0ther (specify below) VP & Corporate Controller			
				Amendment, Date Original (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)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any		3. Transactic Code (Instr. 8)	4. Securi	ties A ispose	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)		
Common Stock	12/12/2011			Code V S(1)	Amount 1,889	(D) D	Price \$ 90.73	(insu: 3 and 4) 19,043	D		
Common Stock	12/13/2011			S <u>(1)</u>	469	D	\$ 90.41	18,574	D		
Common Stock								227	I	By Issuer's 401(k) Plan Trustee	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

Edgar Filing: Dolan Victoria L - Form 4

required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Titl		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	Date	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						、
					4, and 5)						
					i, und 5)						
									Amount		
						Data	F		or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		
					() (2)						

Reporting Owners

Reporting Owner Name / Address		Relationships							
	Director	10% Owner	Officer	Other					
Dolan Victoria L C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE NEW YORK, NY 10022	,		VP & Corporate Controller						
Signatures									
Nina R. Huffman by power of attorney	12/14/201	1							
**Signature of Reporting Person	Date								
Explanation of Response	26.								

Explanation of Responses: If the form is filed by more than one reporting person see Inst

- * 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).
- (1) Sale of shares (with proceeds delivered to the Company) for payment of tax liability incident to vesting of a restricted stock award under the issuer's Executive Incentive Compensation Plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.