Edgar Filing: GARCIA FABIAN T - Form 4

| Form 4 | | | | | | | | | | | |
|--|--|--|---------------------------------------|--|--|----------------------------------|---------------------------|--|--|---|--|
| May 17, 201 FORM Check th if no lon subject to Section Form 4 of Form 5 obligation may com See Instri 1(b). | A 4 UNITED his box o 16. or Draw tinue. STATEM Section 17(| IENT O suant to S a) of the 1 | Wa F CHAN Section 1 Public U | shington NGES IN SECUI (6(a) of th (tility Hol | h, D.C. 20 BENER RITIES ne Securi Iding Co | 0549 FICIA ities I mpar | AL OWN Exchange | DMMISSION ERSHIP OF Act of 1934, 1935 or Section | OMB Number: Expires: Estimated a burden hour response | • | |
| (Print or Type | Responses) | | | | | | | | | | |
| GARCIA FABIAN T Symbo | | | | er Name an ATE PAI | | | 1 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| | | | | | | | | Director 10% Owner X_ Officer (give title Other (specify below) below) C.O.O.Europe, Mkt., Cust. Dev. | | | |
| | | | | onth/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 | | | |
| | K, NY 10022 | | | | | | 1 | Person | ore than One Re | porting | |
| (City) | (State) | (Zip) | Tab | le I - Non-J | Derivative | Secu | rities Acqu | ired, Disposed of, | or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | Date, if | 3. Transactio Code (Instr. 8) Code V | | sed of 4 and (A) or | 5) Price | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | 05/14/2010 | | | S | 9,954 | D | \$ 83.2463 | 102,836 | D | | |
| Common Stock | | | | | | | | 537 | Ι | 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
information contained in this form are not
required to respond unless the formSEC 1474
(9-02)

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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 o Derivativ Security (Instr. 3) | e Conversion or Exercise | 3. Transaction Date (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 5 | Date | 7. Title : Amount Underly Securitie (Instr. 3 | t of ying ies | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr |
|---|-----------------------------|---|--|---|---------------------|--------------------|---|--|---|--|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title N o | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|-----------|--------------------------------|-------|--|--|--|--|
| Reporting O whet Funder Fred Cost | Director | 10% Owner | Officer | Other | | | | |
| GARCIA FABIAN T C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE NEW YORK, NY 10022 | , | | C.O.O.Europe, Mkt., Cust. Dev. | | | | | |
| Signatures | | | | | | | | |
| Nina D. Gillman by power of attorney | 05/17/2010 |) | | | | | | |
| **Signature of Reporting Person | Date | | | | | | | |

Explanation of Responses:

* 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. 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.