UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SCHEDULE 13G

Under the Securities Exchange Act of 1934 (Amendment No. ___)*

MCCORMICK & COMPANY, INCORPORATED

(Name of Issuer)

COMMON SHARES

(Title of Class of Securities)

579780206

(Cusip Number) 12/31/2012

(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

[X] Rule 13d-1(b)
[] Rule 13d-1(c)
[] Rule 13d-1(d)

*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes). Schedule 13G Page _____ of _____ Page

Page _____ of ____ Pages

CUSIP No. ___579780206

- 1. Name of Reporting Person and I.R.S. Identification No.: State Farm Mutual Automobile Insurance Company 37-0533100
- 2. Check the appropriate box if a Member of a Group
 (a) _____
 (b) __X__
- 3. SEC USE ONLY:

Shares

4. Citizenship or Place of Organization: Illinois

Number of 5. Sole Voting Power: 4,888,000

Beneficially 6. Shared Voting Power: 33,228

Owned by Each 7. Sole Dispositive Power: 4,888,000 Reporting Person With 8. Shared Dispositive Power: 33,228	
9. Aggregate Amount Beneficially Owned by each Repor	ting Person: 4,921,228
10. Check Box if the Aggregate Amount in Row 9 exclude	es Certain Shares:
11. Percent of Class Represented by Amount in Row 9:	4.09 %
12. Type of Reporting Person: IC	
Schedule 13G Pag	e of Pages 3 11
CUSIP No579780206	
1. Name of Reporting Person and I.R.S. Identification State Farm Life Insurance Company 37-0533090	n No.:
<pre>2. Check the appropriate box if a Member of a Group (a) (b)X</pre>	
3. SEC USE ONLY:	
4. Citizenship or Place of Organization: Illinois	
Number of 5. Sole Voting Power: 237,800	
Shares Beneficially 6. Shared Voting Power: 7,480	
Owned by Each 7. Sole Dispositive Power: 237,800	
Reporting Person With 8. Shared Dispositive Power: 7,480	
9. Aggregate Amount Beneficially Owned by each Repor	ting Person: 245,280
10. Check Box if the Aggregate Amount in Row 9 exclud	
	es Certain Shares:
11. Percent of Class Represented by Amount in Row 9:	
11. Percent of Class Represented by Amount in Row 9: 12. Type of Reporting Person: IC	
11. Percent of Class Represented by Amount in Row 9: 12. Type of Reporting Person: IC	0.21 % e of Pages
11. Percent of Class Represented by Amount in Row 9:12. Type of Reporting Person: ICSchedule 13GPage	0.21 % e of Pages 11
11. Percent of Class Represented by Amount in Row 9: 12. Type of Reporting Person: IC Schedule 13G Pag CUSIP No579780206	0.21 % e of Pages 11
11. Percent of Class Represented by Amount in Row 9: 12. Type of Reporting Person: IC Schedule 13G Page CUSIP No579780206 1. Name of Reporting Person and I.R.S. Identification State Farm Fire and Casualty Company 37-0533080 2. Check the appropriate box if a Member of a Group (a)	0.21 % e of Pages 11
<pre>11. Percent of Class Represented by Amount in Row 9: 12. Type of Reporting Person: IC Schedule 13G Page CUSIP No579780206 1. Name of Reporting Person and I.R.S. Identification State Farm Fire and Casualty Company 37-0533080 2. Check the appropriate box if a Member of a Group (a)(b)X</pre>	0.21 % e of Pages 11
<pre>11. Percent of Class Represented by Amount in Row 9: 12. Type of Reporting Person: IC Schedule 13G Pag CUSIP No579780206 1. Name of Reporting Person and I.R.S. Identification State Farm Fire and Casualty Company 37-0533080 2. Check the appropriate box if a Member of a Group (a)(b)X_ 3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois Number of 5. Sole Voting Power: 0</pre>	0.21 % e of Pages 11
<pre>11. Percent of Class Represented by Amount in Row 9: 1 12. Type of Reporting Person: IC Schedule 13G Pag CUSIP No579780206 1. Name of Reporting Person and I.R.S. Identificatio State Farm Fire and Casualty Company 37-0533080 2. Check the appropriate box if a Member of a Group (a) (b)X_ 3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois Number of 5. Sole Voting Power: 0 Shares Beneficially 6. Shared Voting Power: 4,377</pre>	0.21 % e of Pages 11
11. Percent of Class Represented by Amount in Row 9: 1 12. Type of Reporting Person: IC Schedule 13G Pag CUSIP No579780206	0.21 % e of Pages 11
11. Percent of Class Represented by Amount in Row 9: 1 12. Type of Reporting Person: IC Schedule 13G Pag CUSIP No579780206 1. Name of Reporting Person and I.R.S. Identification State Farm Fire and Casualty Company 37-0533080 2. Check the appropriate box if a Member of a Group (a)	0.21 % e of Pages 11
11. Percent of Class Represented by Amount in Row 9: 1 12. Type of Reporting Person: IC Schedule 13G Page CUSIP No579780206	9.21 % e of Pages n No.:
11. Percent of Class Represented by Amount in Row 9: 1 12. Type of Reporting Person: IC Schedule 13G Pag CUSIP No579780206	0.21 % e of Pages n No.: ting Person: 4,377
11. Percent of Class Represented by Amount in Row 9: 1 12. Type of Reporting Person: IC Schedule 13G Pag CUSIP No579780206	0.21 % e of Pages 4 11 Pages n No.: ting Person: 4,377 es Certain Shares:

Page _____ of ____ Pages ____

CUSIP No579780206	
1. Name of Reporting Person and I.R.S. Identification No.: State Farm Investment Management Corp.	
2. Check the appropriate box if a Member of a Group (a)	
3. SEC USE ONLY:	
4. Citizenship or Place of Organization: Delaware	
Number of 5. Sole Voting Power: 428,600 Shares	
Beneficially 6. Shared Voting Power: 11,498	
Owned by Each 7. Sole Dispositive Power: 428,600	
Reporting Person With 8. Shared Dispositive Power: 11,498	
9. Aggregate Amount Beneficially Owned by each Reporting Person: 440,098	
10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:	
11. Percent of Class Represented by Amount in Row 9: 0.37 %	
12. Type of Reporting Person: IA	
Schedule 13G Page of Page 6 11	S
CUSIP No579780206	
 Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Employee Retirement Trust 36-6042145 	
<pre>2. Check the appropriate box if a Member of a Group (a) (b)X_</pre>	
3. SEC USE ONLY:	
4. Citizenship or Place of Organization: Illinois	
Number of 5. Sole Voting Power: 3,232,000 Shares	
Beneficially 6. Shared Voting Power: 4,463 Owned by	
Each 7. Sole Dispositive Power: 3,232,000	
Reporting Person With 8. Shared Dispositive Power: 4,463	
9. Aggregate Amount Beneficially Owned by each Reporting Person: 3,236,46	3
10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:	
11. Percent of Class Represented by Amount in Row 9: 2.69 %	
12. Type of Reporting Person: EP	
Schedule 13G Page of Page 7 11	S
CUSIP No579780206	
1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823	
2. Check the appropriate box if a Member of a Group (a)	
3. SEC USE ONLY:	
4. Citizenship or Place of Organization: Illinois	
Number of 5. Sole Voting Power: 649,000 Shares	

	ly 6. Shared Voting Power: 0	
Owned by Each	7. Sole Dispositive Power: 649,000	
Reporting Person Wit	h 8. Shared Dispositive Power: 0	
9. Aggreg	pate Amount Beneficially Owned by each Reporting Person: 649,000	
10. Check	Box if the Aggregate Amount in Row 9 excludes Certain Shares:	
11. Percer	nt of Class Represented by Amount in Row 9: 0.53 %	
12. Type c	of Reporting Person: EP	
Schedule 1	.3G Page of Pages 8 11	
Item 1(a) a	and (b). Name and Address of Issuer & Principal Executive Offices:	
	MCCORMICK & COMPANY, INCORPORATED 18 LOVETON CIRCLE P.O. BOX 6000 SPARKS, MD 21152	
Item 2(a).	Name of Person Filing: State Farm Mutual Automobile Insurance	
	Company and related entities; See Item 8 and Exhibit A	
Item 2(b).	Address of Principal Business Office: One State Farm Plaza	
	Bloomington, IL 61710	
Item 2(c).	Citizenship: United States	
Item 2(d) a	and (e). Title of Class of Securities and Cusip Number: See above.	
Item 3. Th	his Schedule is being filed, in accordance with 240.13d-1(b).	
Se	ee Exhibit A attached.	
Item 4(a).	Amount Beneficially Owned: 9,496,446 shares	
Item 4(b).	Percent of Class: 7.90 percent pursuant to Rule 13d-3(d)(1).	
Item 4(c).	Number of shares as to which such person has:	
	 (i) Sole Power to vote or to direct the vote: 9,435,400 (ii) Shared power to vote or to direct the vote: 61,046 (iii) Sole Power to dispose or to direct disposition of: 9,435,400 (iv) Shared Power to dispose or to direct disposition of: 61,046 	
Item 5. Ow	nership of Five Percent or less of a Class: Not Applicable.	
Item 6. Ow	nership of More than Five Percent on Behalf of Another Person: N/A	
Item 7. Ic	lentification and Classification of the Subsidiary Which Acquired	
the Security being Reported on by the Parent Holding Company: N/A		
Item 8. Ic	8. Identification and Classification of Members of the Group:	
Se	ee Exhibit A attached.	
Item 9. No	otice of Dissolution of Group: N/A	
Schedule 1	3G Page of Pages 9 11	

Item 10. Certification. By signing below I certify that, to the best of

my knowledge and belief, the securities referred to above were acquired in the ordinary course of business and were not acquired for the purpose of and do not have the effect of changing or influencing the control of the issuer of such securities and were not acquired in connection with or as a participant in any transaction having such purpose or effect.

Signature

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

02/06/2013	STATE FARM MUTUAL AUTOMOBILE	
Date	INSURANCE COMPANY	
	STATE FARM LIFE INSURANCE COMPANY	
	STATE FARM FIRE AND CASUALTY COMPANY	
STATE FARM INSURANCE COMPANIES EMPLOYEE RETIREMENT TRUST	STATE FARM INVESTMENT MANAGEMENT CORP.	
STATE FARM INSURANCE COMPANIES SAVINGS AND THRIFT PLAN FOR U.S. EMPLOYEES	STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM GROWTH FUND	
	STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM BALANCED FUND	

STATE FARM MUTUAL FUND TRUST

/s/ Paul N. Eckley

/s/ Paul N. Eckley

Paul	N. Eckley, Fiduciary	of
	each of the above	
Schedule	13G	

Paul N. Eckley, Vice President of each of the above Page _____ of ____ Pages 10 11

EXHIBIT A

This Exhibit lists the entities affiliated with State Farm Mutual Automobile Insurance Company ("Auto Company") which might be deemed to constitute a "group" with regard to the ownership of shares reported herein.

Auto Company, an Illinois-domiciled insurance company, is the parent company of multiple wholly owned insurance company subsidiaries, including State Farm Life Insurance Company, and State Farm Fire and Casualty Company. Auto Company is also the parent company of State Farm Investment Management Corp. ("SFIMC"), which is a registered transfer agent under the Securities Exchange Act of 1934 and a registered investment advisor under the Investment Advisers Act of 1940. SFIMC serves as transfer agent and investment adviser to State $\ensuremath{\mathsf{Farm}}$ Associates' Funds Trust, State $\ensuremath{\mathsf{Farm}}$ Variable Product Trust, and State Farm Mutual Fund Trust, three Delaware Business Trusts that are registered investment companies under the Investment Company Act of 1940. Auto Company also sponsors two qualified retirement plans for the benefit of its employees, which plans are named the State $\ensuremath{\mathsf{Farm}}$ Insurance Companies Employee Retirement Trust and the State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees (collectively the "Qualified Plans").

As part of its corporate structure, Auto Company has established an Investment Department. The Investment Department is directly or indirectly responsible for managing or overseeing the management of the investment and reinvestment of assets owned by each person that has joined in filing this Schedule 13G. Moreover, the Investment Department is responsible for voting proxies or overseeing the voting of proxies related to issuers the shares of which are held by one or more entities that have joined in filing this report. Each insurance company included in this report and SFIMC have established an Investment Committee that oversees the activities of the Investment Department in managing the firm's assets. The Trustees of the Qualified Plans perform a similar role in overseeing the investment of each plan's assets.

Pursuant to Rule 13d-4 each person listed in the table below expressly disclaims "beneficial ownership" as to all shares as to which such person has no right to receive the proceeds of sale of the security and disclaims that it is part of a "group".

Schedule 13G	-	of Pages 1
Name	Classificatio Under Item 3	
State Farm Mutual Automobile Insurance Compar	iy IC	4,921,228 shares
State Farm Life Insurance Company	IC	245,280 shares
State Farm Fire and Casualty Company	IC	4,377 shares
State Farm Investment Management Corp. State Farm Associates Funds Trust - State	IA	11,498 shares
Farm Growth Fund	TV	428,600 shares
State Farm Associates Funds Trust - State	ĨV	420,000 Shares
Farm Balanced Fund	IV	0 shares
State Farm International Life Insurance		
Company Ltd.	IV	0 shares
State Farm Insurance Companies Employee		
Retirement Trust	EP	3,236,463 shares
State Farm Insurance Companies Savings and		
Thrift Plan for U.S. Employees	EP	
Equities Account		448,400 shares
Balanced Account	T) (200,600 shares
State Farm Mutual Fund Trust	IV	0 shares
		9,496,446 shares