FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| Machinaton | $D \subset$ | 20540 | |
|-------------|-------------|-------|--|
| Washington, | D.C. | 20549 | |

| ngton, D.C. 20549 | OMB APPROVAL |
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| | OMB Number: | 3235-028 | | | | | | | | | | |
| | Estimated average burden | | | | | | | | | | | |
| - 1 | hours por rosponso: | 0.1 | | | | | | | | | | |

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

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* MCMULLEN CHRISTINA M | | | | | | 2. Issuer Name and Ticker or Trading Symbol MCCORMICK & CO INC [MKC] | | | | | | | | | all applic Directo | able) | g Pers | on(s) to Issu 10% Ow Other (s | vner | |
|--|---|--|---|---------|---|---|--------------------|------|------------------------------------|-------------------------------|--------------------|--|--|-----------------------|--|--|---|--|--|--|
| | , | OMPANY, INC | (Middle) ORPORA | ΓED | | 3. Date of Earliest Transaction (Month/Day/Year) 07/10/2018 | | | | | | | | | below) Vice President & Controller | | | | | |
| (Street) SPARKS (City) | 6 M | D | 21152 (Zip) | | 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Indiv ne) X | ′ | | | | | |
| | | Tab | le I - Nor | n-Deriv | vativ | e Se | curities | s Ac | quired, | Dis | posed c | of, or Be | neficia | ılly | Owned | | | | | |
| 1. Title of Security (Instr. 3) | | Date | ransaction e onth/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispos | | Dispose | ities Acquir d Of (D) (Ins | |) or 5. Amou Securitie Benefici Owned F | | s ally ollowing | Form (D) o | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Reported Transact (Instr. 3 a | ion(s) | | | (Instr. 4) | |
| Common | Stock - Vot | ing | | | | | | | | | | | | 1,024 | | | D | | | |
| Common Stock - Non Voting | | | | | | | | | | | | | | 39 | | | D | | | |
| | | ٦ | Гable II - | | | | | | | | | , or Bend ble secu | | | wned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | Date, | 4. Transaction Code (Instr. 8) | | | | 6. Date E Expiratio (Month/D | n Date | : | le and 7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4) | | D | . Price of erivative ecurity nstr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e s Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amount or Number of Shares | | | | | | | |
| Phantom Stock | (1) | 07/10/2018 | | | A | | 4.7852 | | (1) | | (1) | Common Stock - Voting | 4.7852 | 2 | \$117.92 | 72.755 | 53 | I | Non- Qualified Retirement Savings Plan | |

Explanation of Responses:

1. Each share of phantom stock represents the right to receive one share of Common Stock - Voting. Shares of phantom stock are payable in shares of Common Stock - Voting in accordance with the terms of the Non-Qualified Retirement Savings Plan.

Remarks:

Jason E. Wynn, Attorney-in-07/12/2018 **Fact**

** Signature of Reporting Person

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.