| SEC Form 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

| | ROVAL |
|-------------|-----------|
| OMB Number: | 3235-0287 |

| Estimated average burden | |
|--------------------------|-----|
| hours per response: | 0.5 |

| I. Nume and Address of Reporting Leson | | | 2. Issuer Name and Ticker or Trading Symbol <u>MCCORMICK & CO INC</u> [MKC] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|--|----------------|---|---|--|--|--|--|--|
| (Last) (First) (Middle) MCCORMICK & COMPANY, INCORPORATED 18 LOVETON CIRCLE | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 04/17/2013 | Director 10% Owner X Officer (give title below) Other (specify below) V.P., General Counsel & Sec. | | | | | |
| (Street) SPARKS MD 21152 | | 21152 (Zip) | 4. If Amendment, Date of Original Filed (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 | | | | | |

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. Transa Code (8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | Code V | | Amount (A) or (D) | | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) | | |
| Common Stock - Voting | | | | | | | | 40,253.125 | D | | | |
| Common Stock - Voting | | | | | | | | 2,456.4195 | I | 401(k) Retirement Plan | | |
| Common Stock - Voting | | | | | | | | 17,174.828 | Ι | Trust | | |
| Common Stock - Non Voting | 04/17/2013 | | М | | 1,881 | A | \$29.89 | 1,881.445 | D | | | |
| Common Stock - Non Voting | 04/17/2013 | | S | | 1,881 | D | \$71.3133 | 0.445 | D | | | |

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

| 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) | | 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 | | | | |
| Options - Right to Buy | \$29.89 | 04/17/2013 | | М | | | 1,881 | 03/25/2010 | 03/24/2019 | Common Stock - Non Voting | 1,881 | \$0 ⁽¹⁾ | 0 | D | |

Explanation of Responses:

1. Option exercised.

Remarks:



04/18/2013

Date

** 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.

Attorney-in-Fact