## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response	. 0.5								

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See 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* Piper Sarah				2. Issuer Name and Ticker or Trading Symbol  MCCORMICK & CO INC [ MKC ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last) 24 SCHI SUITE 1	SCHILLING ROAD				09/	3. Date of Earliest Transaction (Month/Day/Year) 09/24/2024								Officer (give title Other (specify below)  Chief Human Relations Officer				
(Street) HUNT V	ALLEY M		21031 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						Lin	ndividual or Joint/Group Filing (Check Applicable e)  Form filed by One Reporting Person  Form filed by More than One Reporting Person						
	<u> </u>			-Deriv	vativ	e Se	curities	s Acc	quired,	Disp	osed c	of, or Be	neficial	ly Owned	<u> </u>			
1. Title of Security (Instr. 3)		2. Trans Date (Month		action 2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 5)				Benefici	es ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
							Code	V Amo	Amount	t (A) or (D) Pr		Transact (Instr. 3	ion(s)		(11150. 4)			
Common	Stock - Vot														0.094	D		
		٦	Table II - I )	Deriva e.g., p	ative outs,	Sec call	urities . s, warra	Acqι ants,	ired, D option	ispo s, c	sed of, onverti	or Ben ble secเ	eficially ırities)	Owned				
Security (Instr. 3) Pri	2. 3. Transaction Date (Month/Day/Year) if any (Month/Day		Date,	Transaction Code (Instr. 8) Sec Acc (A) Dis of (		of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code		(A)		Date Exercisab		xpiration ate	o N	Amount or Number of Shares					
Phantom Stock	(1)	09/24/2024			A		27.781		(1)		(1)	Common Stock - Voting	27.781	\$83.76	2,395.74	4 I	Non Qualified Retirement Savings	

## **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.

Jason E. Wynn, Attorney-in-

09/25/2024

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.