FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP
O I A I E III E I I I	OI OII/MITOLO	IN DENEL IOIAL	OWNER

OMB APPROVAL OMB Number: 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).

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* TIMBIE MARK T					2. Issuer Name and Ticker or Trading Symbol MCCORMICK & CO INC [MKC]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director					
(Last) (First) (Middle) MCCORMICK & COMPANY, INCORPORATED 18 LOVETON CIRCLE			ΓED	3. Date of Earliest Transaction (Month/Day/Year) 03/28/2007									below)	Consumer Products Group					
				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SPARKS	S M	ID	21152											X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)											Persor	ı				
		Tab	ole I - Non	-Deriv	ative	e Se	curities	s Ac	quired,	Disp	osed o	of, or Be	neficia	ly Owned					
Date				2A. Deemed Execution Day/Year) Day/Year) if any (Month/Day/Y		Date	Date, Transaction Code (Instr.					Benefici Owned F	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount	(A) or (D) Price		Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)				
Common Stock - Voting												34,18	34,188.806		D				
Common	Stock - No	n Voting												12,81	15.555		D		
		-	Table II - I						uired, D s, option					Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) if any ce of (Month/Day/Year) (Month/		4. Transaction Code (Instr.		ction	5. Number n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		ble and	7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amount or Number of Shares						
Option - Right to Buy	\$38.28	03/28/2007			A		24,676		03/28/200	8 0	3/27/2017	Common Stock - Voting	24,676	\$0	24,67	6	D		
Option - Right to Buy	\$38.28	03/28/2007			A		8,224		03/28/200	8 0	3/27/2017	Common Stock - Non Voting	8,224	\$0	8,224	ļ	D		
Restricted Stock Units	(1)	03/28/2007			A		5,458		(2)		(2)	Common Stock - Voting	5,458	\$0	5,458		D		
Restricted Stock Units	(1)	03/28/2007			A		1,818		(2)		(2)	Common Stock - Non Voting	1,818	\$0	1,818		D		

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of Common Stock.
- 2. The reported Restricted Stock Units entitle the reporting person to receive, on each of the first and second anniversaries of the date of grant, a distribution of common stock equal to 50% of the grant. Once vested, the restricted Stock Units are settled in an equal numer of shares of Common Stock.

Remarks:

Sonia Cudd, Attorney-in-Fact

03/30/2007

** Signature of Reporting Person

Date

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.