FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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* PRESTON MARGARET M V						2. Issuer Name and Ticker or Trading Symbol MCCORMICK & CO INC [MKC]								Check all ap	10% Own		% Owner		
(Last) (First) (Middle) MCCORMICK & COMPANY, INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 11/28/2006								Officer (give title Other (specify below)					
18 LOVETON CIRCLE (Street) SPARKS MD 21152				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	ate) (Zip)																
		Tabl	eI-	Non-Deriv	/ativ	e Secı	urities	Ac	quir	ed, [Disposed (of, or	Benefici	ially Own	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year				- 1	2A. Deemed Execution Date, if any (Month/Day/Year)		Ti C	3. Transaction Code (Instr. 8)					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)		
								С	ode	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)					
Common Stock - Voting														1,61	9	D			
Common Stock - Voting 11/28/2006					06	5			A		70.478	A	\$38.31	3,647.03		I		Deferred Compensation Plan	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Execution Date, T Security or Exercise (Month/Day/Year) if any					ransaction of ode (Instr. Derivative			Expi	iration	rcisable and Date Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	deriva Secur Benef Owne Follov Repor	ities icially d ving rted action(s)	10. Owners Form: Direct (I or Indire (I) (Instr	Beneficial Ownership ct (Instr. 4)			
					Code	v	(A)	(D)	Date Exer	e rcisabl	Expiration e Date	Title	Amount or Number of Shares						

Explanation of Responses:

Remarks:

Sonia G. Cudd, Attorney-in-

fact

** Signature of Reporting Person

Date

11/29/2006

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

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.

 $^{^{\}star}$ 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).