FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
	Estimated average burd	len							
l	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

	d Address of EY JOHN		2. Issuer Name and Ticker or Trading Symbol  MCCORMICK & CO INC [ MKC ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner									
	ast) (First) (Middle) CCORMICK & COMPANY, INCORPORATED B LOVETON CIRCLE					3. Date of Earliest Transaction (Month/Day/Year) 09/25/2006									Officer (giv below)			Other (spelow)	specify	
(Street) SPARKS MD 21152 (City) (State) (Zip)					- 4. 1	If Amen	dment	, Date	of Ori	ginal f	Filed (Month/D	)	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-Deri  1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/					n (ear)	2A. Deemed Execution Date,		е,	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr.		
								Code	v	Amount	(A) or (D)	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			4)			
Common Stock - Voting															575	D				
Common Stock - Voting				09/25/2006					A		32.459	A	\$36.97	9	974.13		I		Deferred Compensation Plan	
Common Stock - Voting				09/26/200	06				A		72.874	A	\$37.05	1	1,047			Deferred Compensation Plan		
		Та	ble I								sposed of, , converti				ned					
Security or Exercise (Month/Day/Year) if any			ution Date,	4. Trans Code 8)	action (Instr.	5. Numbe of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exp	iration	ercisable and Date y/Year)	Amou Secur Under Deriva Secur	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		tive deriv ty Secu 5) Bene Owne Follo Repo	rities ficially ed wing rted saction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exe	e rcisab	Expiration Date	Title	Number of Shares								

**Explanation of Responses:** 

Remarks:

Sonia G. Cudd, Attorney-in-09/27/2006

**Fact** 

\*\* Signature of Reporting Person Date

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).