FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL

| | OMB Number: | 3235-0287 | | | | | | | |
|----|--------------------------|-----------|--|--|--|--|--|--|--|
| II | 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).

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

| 1. Name and Address of Reporting Person* PRESTON MARGARET M V | | | | | | 2. Issuer Name and Ticker or Trading Symbol MCCORMICK & CO INC [MKC] | | | | | | | eck all appli | cable) or | | Owner | |
|--|--|---------------------|--|--|---|--|---------|--|--|-----|---|-------|----------------------|---|---|---|--|
| (Last) (First) (Middle) MCCORMICK & COMPANY, INCORPORATED | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/18/2009 | | | | | | | | Office below | r (give title) | Other below | (specify | |
| 18 LOVETON CIRCLE (Street) SPARKS MD 21152 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Lin | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| Date | | | | 2. Transac Date (Month/Da | Execution Date, | | Code (I | Transaction Disposed Of (D) (Instr. 3, Code (Instr. | | | | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | Code | v | Amount (A) (D) | | A) or D) | Price | Transac (Instr. 3 | ction(s) | | (111511.4) | |
| Common Stock - Voting | | | | | | | | | | | | | | 5 | ,369 | D | |
| Common Stock - Non Voting | | | | | | | | | | | 1 | 1,250 | | | | | |
| | 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 | se (Month/Day/Year) | 3A. Deemed Execution Dat if any (Month/Day/Ye | Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable a Expiration Date (Month/Day/Year) | | | 7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | · V | (A) | | Date Exercisable | Expiration ble Date Title Amount or Number of Shares | | (Instr. 4) | | | | | | |
| Phantom Stock | (1) | 05/18/2009 | | A | | 11.9617 | | (1) | | (1) | Commo Stock - | | 9617 | \$31.35 | 7,069.07 ⁽² |) I | Deferred Compensation |

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 Deferred Compensation Plan .
- 2. Amount includes 7,057.11 shares of phantom stock previously reported in Table I as Common Stock-Voting.

Remarks:

W. Geoffrey Carpenter, Attorney-in-fact 05/20/2009

** 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.