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 I | hurdon | | | | | | | | |

0.5

hours per response:

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* Smith Michael R (Last) (First) (Middle) MCCORMICK & COMPANY, INCORPORATED 18 LOVETON CIRCLE (Street) | | | | | 3. D 10/ | Issuer Name and Ticker or Trading Symbol MCCORMICK & CO INC [MKC] Jace of Earliest Transaction (Month/Day/Year) 10/24/2011 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | (Check X 6. Indiv | tionship of Reportinall applicable) Director Officer (give title below) VP Tre | | 10% Oth belo easury & | o Owner er (specify w) x Applicable | |
|--|--|--|------------------------------|------|--|---|--|------------------|---|-------------------------|--------------------------|--------------------------------------|---|--|---|--|--|--|
| SPARKS (City) | M. (St | | 21152 Zip) | | | | | | | | | | | X | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/ | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) | | | s Acquir of (D) (Ins | ed (A) or str. 3, 4 a | nd 5) Secur Benef | | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | of Indirect t Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | (A) oi (D) | Price | • | Trans | action(s) 3 and 4) | | (Instr. 4) | |
| Common Stock - Voting 10/24/20 | | | | | 2011 |)11 | | J ⁽¹⁾ | V | 37.776 | A | \$49 | .6703 | 6, | 738.91 | D | | |
| Common Stock - Non Voting 10/24/20 | | | | 2011 | 011 | | J ⁽¹⁾ | V | 23.699 | A | \$49 | \$49.6703 | | ,227.7 | D | | | |
| Common Stock - Non Voting 11/16/20 | | | | 2011 | 011 | | | G | V | 220 | D | | (2) | | ,007.7 | D | | |
| | 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) | tive ty Conversion or Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Price of Derivative Security Security Execution Date, if any (Month/Day/Year) Security S | | 4. Transa Code (8) | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares | | Deri Sec (Inst | rice of vative urity tr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownersh Form: Direct (D) or Indirec (I) (Instr. | Beneficial Ownership t (Instr. 4) | | | |

Explanation of Responses:

- 1. Dividend Reinvestment.
- 2. Shares being gifted; no disposition price required.

Remarks:

W. Geoffrey Carpenter, Attorney-in-fact

11/17/2011

** 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.