FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OWNERSHIP

| Washington, | D.C | 20549 |
|-------------|------|-------|
| wasiniyun, | D.C. | 20343 |

| Machinaton | $D \subset$ | 20540 |
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| Washington, | D.C. | 20549 |

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| OMB Number: | 3235-0 |

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| Estimated average burder | า |
| hours per response: | 1.0 |

OMB ADDROVAL

Form 3 Holdings Reported

Instruction 1(b)

| Form 4 Transactions Reported. 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* WEATHERHOLTZ KAREN D | | | | | 2. Issuer Name and Ticker or Trading Symbol MCCORMICK & CO INC [MKC] | | | | | | | 5. Relationship of Repor (Check all applicable) X Director | | | ting Po | () | Issuer Owner |
| (Last) (First) (Middle) MCCORMICK & COMPANY, INCORPORATED 18 LOVETON CIRCLE | | | | | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 11/30/2003 | | | | | | /Year) | y | belov | er (give title v) Senior Vi | | belo | ´ |
| (Street) SPARKS (City) | MI (Sta | | 21152 Zip) | 4. If Amen | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | erson | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| Date (Month/Day/Year) | | Execution Date, if any | | 3. Transaction Code (Instr. 8) | | | | | or Dispose | ed 5. Amount of Securities Beneficially Owned at end of | | es ally | Ownership Form: Direct | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | Amoun | | (A) or (D) Price | | Issuer's Year (Ins 4) | | | | ect (I) | (Instr. 4) | | |
| Common | Stock - Vot | ing | | | | | | | | | | 24,784 D | | | | | |
| Common Stock - Voting | | | | 19,265.407 | | | | 5.407(1) | | | Profit Sharing Plan | | | | | | |
| | 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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | of Deriv Secu Acqu (A) o Dispe | erivative scurities squired) or sposed (D) sstr. 3, 4 dd 5) | | Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares | | nt er | | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | s Silly | 10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Beneficial Ownership t (Instr. 4) |

Explanation of Responses:

1. Shares held in the McCormick Profit Sharing Plan as of 11/30/03. The reporting person owns units in the McCormick Stock Fund in the Profit Sharing Plan and the number of shares reported as beneficially owned is based on the reporting person's pro rata interest in the net asset value of the McCormick Stock Fund on the date indicated.

Remarks:

W. Geoffrey Carpenter, 01/15/2004 Attorney-in-fact

** 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.