FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Was

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

hington, D.C. 20549	
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OMB APPROVAL											
OMB Number: 3235-028											
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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

1. Name and Address of Reporting Person* HRABOWSKI FREEMAN A III						Issuer Name and Ticker or Trading Symbol MCCORMICK & CO INC [MKC]								Relationship of Reporting Person(s) to Issuer (Check all applicable)						
														Director		10% O		ner		
	(Fi		3. Date of E 01/21/20(ansactio	on (Mo	onth/Day/Year			Officer (give title below)		Other (specification)	pecify							
18 LOVETON CIRCLE							lment, Da	te of Ori	iginal	Filed (Month/l		6. Individual or Joint/Group Filing (Check Applicable								
(Street)												Line) X Form filed by One Reporting Person								
SPARKS MD 21152														Form filed by More than One Reporting Person						
(City)	(Si	ate)	(Zip)																	
		Tab	le I -	Non-Deriv	vati	ve Secu	ırities <i>A</i>	Acquii	red,	Disposed	of, or	Benefic	ially C	wned						
				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported		Form: (D) or	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	action(s) 3 and 4)			4)			
Common	Stock - Vo	ing		01/21/20	04			J ⁽¹⁾	V	0.004	A	\$29.62	3,2	276.964		D				
Common Stock - Voting 01					04			J ⁽²⁾	V	14.494	A	\$29.55	3	,073.7		I	Defen Comp Plan	red ensation		
Common Stock - Voting 01/27/2004								A		9.804	A	\$30.6	3,0	083.504		I	Defen Comp Plan	red ensation		
Common Stock - Non-Voting 01/21/2004								J ⁽¹⁾	V	0.003	A	\$29.62	2,4	119.651		D				
		-	Table							isposed o s, conver				vned	-,					
1. Title of 2. 3. Transaction Date Execution Date, Ti							5. Number		te Exe	ercisable and Date	7. Title). Number derivative		nership	11. Nature of Indirect		

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)	Transaction of Code (Instr. 8) Se Ad (A Di of Charles)				6. Date Exerc Expiration Da (Month/Day/\)	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Option - Right to Buy	\$30.6	01/27/2004		A		2,500		01/27/2005	01/26/2014	Common Stock - Voting	2,500	(3)	2,500	D	
Option - Right to Buy	\$30.6	01/27/2004		A		2,500		01/27/2005	01/26/2014	Common Stock - Non- Voting	2,500	(3)	2,500	D	

Explanation of Responses:

- 1. Shares acquired pursuant to the McCormick Dividend Reinvestment Plan.
- 2. Shares acquired pursuant to Dividend Reinvestment in the Deferred Compensation Plan.
- 3. Option granted.

Remarks:

W. Geoffrey Carpenter, Attorney-in-fact

01/29/2004

** 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.