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 burd | en | | | | | | | | | |
| 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

| 1. Name and Address of Reporting Person* <u>Conway Michael Aaron</u> | | | | | | | 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 Officer (give title Other (specify below) below) | | | | |
|--|---|--|---|-------------|---------|--|--|-----|---|---|------------------|--|--|--|---|---|---|--|---|--|
| (Last) (First) (Middle) MCCORMICK & COMPANY, INCORPORATED | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/28/2018 | | | | | | | | | | | | | |
| 18 LOVETON CIRCLE (Street) SPARKS MD 21152 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (3) | | | | <u></u> | _ | | | | | | | <u>.</u> | | | | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transar Date (Month/Date | | | | | | ction 2A. Deemed Execution Date, | | | 3. 4 Transaction Code (Instr. 5 | | 4. Secu | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, | | | 5. Amou Securitie Benefici | nt of es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount (A | | or Price | | Transac (Instr. 3 | ion(s) | | | (| |
| Common Stock - Voting | | | | | | | | | | | | | | | 3,539 | | | D | | |
| | | Т | able II - I | | | | | | | | | , or Ben | | | wned | | | <u>'</u> | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | Date, Trans | | | ı of l | | 6. Date Exercisal Expiration Date (Month/Day/Year | | | Amount of Securities Underlyin Derivative | | | Price of erivative ecurity istr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | e s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | xpiration ate | Title | Amount or Number of Shares | | | | | | | |
| Restricted Stock Units | (1) | 03/28/2018 | | | A | | 962 | | (2) | | (2) | Common Stock - Voting | 962 | | \$0 | 962 | | D | | |
| Options - Right to | \$105.95 | 03/28/2018 | | | A | | 2.956 | | (3) | | (3) | Common Stock - | 2.956 | | \$0 | 2.956 | | D | | |

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of Common Stock.
- $2. The \ restricted \ stock \ units \ vest \ in \ full \ on \ 3/15/2019 \ and \ are \ settled \ in \ an \ equal \ number \ of \ shares \ of \ Common \ Stock.$
- 3. The options vest in full on 3/15/2019.

Remarks:

Jason Wynn, Attorney-in-Fact 03/30/2018

** Signature of Reporting Person Date

Voting

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.