FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Issuer Name and Ticker or Trading Symbol 6. Relationship of Reporting Person(s) to Issuer (Check all applicable) McCormick & Company, Incorporated MKC X Director 10% Owner Hrabowski, III Freeman A I.R.S. Identification Number Officer (give title below) Other (specify below) (Last) (First) (Middle) 4. Statement for of Reporting Person, Month/Day/Year McCormick & Company, Incorporated January 28, 2003 if an entity (voluntary) 18 Loveton Circle 7. Individual or Joint/Group Filing (Check Applicable Line) (Street) 5. If Amendment, Date of Original X Form filed by One Reporting Person Sparks, MD 21152 (Month/Dav/Year) Form filed by More than One Reporting Person January 30, 2003 (City) (State) (Zip) Table I — Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security 2. Trans-2A. 3. Trans-4. Securities Acquired (A) or Disposed 5. Amount of 5. Owner-7. Nature of Indirect Beneficial Ownership Deemed action Securities ship Form: (Instr. 3) action of (D) Date Execution Code Instr. 3, 4 & 5) Beneficially Direct (D) (Instr. 4) (Month/ Date, (Instr. 8) Owned Followor Indirect Day/ if any ing Reported (I)Code Amount (A) Price Year) (Month/Day (Instr. 4) Transactions(s) or Year) (Instr. 3 & 4) (D) Common Stock - Voting 2,637.112 D Common Stock - Voting 1/28/03 A 60.647 A \$22.26 I Deferred Compensation 2,144.732(1 Plan D Common Stock - Non-2,413.90 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).

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 control number

FORM 4 (continued)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			<u> </u>	J / I		• •								
1. Title of	2. Conver-	3. Trans-	3A.	4.	5. Number of Derivative		6. Date		7. Title and Amount		8. Price of	9. Number of	10.	11. Nature
Derivative	sion or	action	Deemed	Trans-	Securities Acquired (A) or		Exercisable		of Underlying		Derivative	Derivative	Owner-	of Indirect
Security	Exercise	Date	Execution	action	Disposed of (D)	and Expiration		Securities		Security	Securities	ship	Beneficial	
	Price of			Code			Date		(Instr. 3 & 4)		(Instr. 5)	Beneficially	Form	Ownership
(Instr. 3)	Derivative	(Month/	if any		(Instr. 3, 4 & 5)		(Month/Day/ Year)					Owned	of	(Instr. 4)
	Security	Day/ Year)	(Month/	(Instr.								Following	Deriv-	
			Day/ Year)	8)								Reported	ative	
			, , , , , , , , , , , , , , , , , , ,									Transaction(s)	Security:	
				Code V	/ (A)	(D)	Date	Expira-	Title	Amount	1	(Instr. 4)	Direct	
							Exer-	tion		or			(D)	
							cisable	Date		Number			or	
										of			Indirect	
										Shares			(I)	
													(Instr. 4)	
Option -	\$22.26 01/28/03			2,500		01/29/04	01/28/13	Common	2,500		2,500			
Right to Buy	,								Stock -					
									Voting					
Option -	\$22.26	01/28/03		A	2,500		01/29/04	01/28/13	Common	2,500		2,500		
Right to Buy									Stock -					
									Non-					
1									Voting					

Explanation of Responses:

(1) Shares acquired through dividend reinvestment in the McCormick Deferred Compensation Plan at various dates and various prices.

By: /s/ Freeman A. Hrabowski, III Robert W. Skelton, Attorney-in-Fact **Signature of Reporting Person

February 4, 2003 Date

Expires: January 31, 2005 Estimated average burden hours per response. . .0.5

Filed By Romeo and Dye's Section 16 Filer www.section16.net 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.