| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | |
|---------------------|-----------|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | |
| Estimated average b | ourden | | | | | |
| | | | | | | |

| Instruction | 1(b). | File | d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | 0.5 | |
|--|--------------|-----------------|--|--|----------------------------|-------------------------|--------|--|
| 1. Name and Address of Reporting Person [*] <u> PRESTON MARGARET M V</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% Ow | ner | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 04/16/2004 | | Officer (give ti below) | itle Other (s below) | pecify | |
| MCCORMI | ICK & COMPAN | Y, INCORPORATED | | | | | | |

18 LOVETON CIRCLE 6. Individual or Joint/Group Filing (Check Applicable Line) 4. If Amendment, Date of Original Filed (Month/Day/Year) (Street) Form filed by One Reporting Person X 21152 **SPARKS** MD Form filed by More than One Reporting Person (City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| Table 1 Non Derivative occurrice, Disposed of, of Derivitiany office | | | | | | | | | | |
|--|--|---|------------------------------|---|---|---------------|---|---|---|----------------------------------|
| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. | |
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | 4) |
| Common Stock - Voting | | | | | | | | 472 | D | |
| Common Stock - Voting | 04/06/2004 | | J ⁽¹⁾ | | 0.408 | A | \$33.33 | 104.698 | Ι | Deferred Compensation Plan |

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

1. Title of 3. Transaction 3A. Deemed 5. Number 6. Date Exercisable and 7. Title and 8. Price of 9. Number of 11. Nature 10 Expiration Date (Month/Day/Year) Amount of Securities derivative Securities Ownership of Indirect Beneficial Derivative Conversion Dat **Execution Date** Transaction of Derivative (Month/Day/Year) Derivative Security Code (Instr. or Exercise if any Security (Instr. 5) Form: Direct (D) or Indirect (I) (Instr. 4) (Instr. 3) Price of Derivative (Month/Dav/Year) Underlying Derivative 8) Securities Beneficially Ownership Acquired Owned (Instr. 4) (A) or Disposed of (D) Security (Instr. 3 Security Following Reported Transaction(s) and 4) (Instr. 3, 4 and 5) (Instr. 4) Amount Number Expiration Date of ν (A) (D) Title Shares Code Exercisable Date

Explanation of Responses:

1. Shares acquired pursuant to Dividend Reinvestment in the McCormick Deferred Compensation Plan.

Remarks:

W. Geoffrey Carpenter, Attorney-in-fact

04/16/2004

** 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.