Instruction 1(b).

FORM 4

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

Washington,	D.C.	20549	
-------------	------	-------	--

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APF	PROVAL							
	OMB Number: 3235-0287 Estimated average burden								
	hours per response	o. 0.5							

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* PRESTON MARGARET M V				2. Issuer Name and Ticker or Trading Symbol  MCCORMICK & CO INC [ MKC ]									ck all app	,	ng Per	rson(s) to Is				
(Last)	(Fir	st) (N	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/29/2023										Office below	er (give title /)		Other (s below)	pecify	
MCCORMICK & COMPANY, INCORPORATED 24 SCHILLING ROAD, SUITE 1				4. If Amendment, Date of Original Filed (Month/Day/Year) 03/31/2023							Line)	Individual or Joint/Group Filing (Check Applicatine)  X Form filed by One Reporting Person				·				
(Street) HUNT VALLEY	, MI	) 2	1031		Rul	Form filed by More than One Reporting Person  Rule 10b5-1(c) Transaction Indication										orting				
(City)	(Sta	ate) (Z	Zip)			Check this box to indicate that a transaction was made pursuant to a cc satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruc								a cont structio	a contract, instruction or written plan that is intended to truction 10.					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day)				Execut y/Year) if any		Deemed ution Date, / ith/Day/Year)		3. Transaction Code (Instr. 8)  4. Securitie: Disposed O 5)		s Acquired (A) of of (D) (Instr. 3, 4		and Securi Benefic Owned		ties Fi cially (I d Following (I		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) (D)	Prio	:e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock - Voting 03/29/2					2023	023 F		4,413	D	\$8	1.14	91,02	23.192(1)		D					
	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)	if any	emed ion Date, /Day/Year)	4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date Ar (Month/Day/Year) Se Un De		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (In	Price of erivative ecurity istr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amour or Number of Shares	r						

## **Explanation of Responses:**

1. Due to an administrative error, the Form 4, as originally filed, incorrectly reported the Reporting Person's direct holdings of Common Stock - Voting following the transaction as 95,023.192 shares when the correct amount was 91,023.192 shares. This prior error also affected the Reporting Person's direct holdings of Common Stock - Voting reported on subsequent Form 4 reports filed on April 27, 2023 and May 19, 2023.

Jason E. Wynn, Attorney-in-

<u>fact</u>

\*\* Signature of Reporting Person Date

09/06/2023

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.