Beneficially 6. Shared Voting Power: 32,378

Shares

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

SCHEDULE 13G

Under the Securities Exchange Act of 1934 (Amendment No. ____)*

MCCORMICK & COMPANY, INCORPORATED
(Name of Issuer)
COMMON SHARES
(Title of Class of Securities)
579780206
(Cusip Number) 12/31/2010
(Date of Event Which Requires Filing of this Statement)
Check the appropriate box to designate the rule pursuant to which this Schedule is filed:
[X] Rule 13d-1(b) [] Rule 13d-1(c) [] Rule 13d-1(d)
*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.
The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).
Schedule 13G Page of Pages 2 11
CUSIP No579780206
1. Name of Reporting Person and I.R.S. Identification No.: State Farm Mutual Automobile Insurance Company 37-0533100
2. Check the appropriate box if a Member of a Group (a) (b) _X_
3. SEC USE ONLY:
4. Citizenship or Place of Organization: Illinois
Number of 5. Sole Voting Power: 4,888,000

0wn Eac	red by 7. Sole Dispositive Power: 4,888,000	
Rep	orting	
	son With 8. Shared Dispositive Power: 32,378	
9.	Aggregate Amount Beneficially Owned by each Reporting Per	son: 4,920,378
10.	Check Box if the Aggregate Amount in Row 9 excludes Certa	in Shares:
11.	Percent of Class Represented by Amount in Row 9: 4.09 %	
12.	Type of Reporting Person: IC	
Sch	Page3	of Pages
CUSI	P No579780206	
1.	Name of Reporting Person and I.R.S. Identification No.: State Farm Life Insurance Company 37-0533090	
2.	Check the appropriate box if a Member of a Group (a) (b)X	
3.	SEC USE ONLY:	
4.	Citizenship or Place of Organization: Illinois	
Num	ber of 5. Sole Voting Power: 237,800	
	reseficially 6. Shared Voting Power: 7,476	
	ed by	
Rep	ortingson With 8. Shared Dispositive Power: 7,476	
	<u> </u>	0.45 0.70
9.	Aggregate Amount Beneficially Owned by each Reporting Per	
10.	Check Box if the Aggregate Amount in Row 9 excludes Certa	in Shares:
11.	Percent of Class Represented by Amount in Row 9: 0.20 %	
12.	Type of Reporting Person: IC	
Sch	redule 13G Page4	of Pages
CUSI	P No579780206	
1.	Name of Reporting Person and I.R.S. Identification No.: State Farm Fire and Casualty Company 37-0533080	
2.	Check the appropriate box if a Member of a Group (a) (b)X	
3.	SEC USE ONLY:	
4.	Citizenship or Place of Organization: Illinois	
Num	ber of 5. Sole Voting Power: 0	
	res eficially 6. Shared Voting Power: 4,377	
	ed by	
Rep	ortingson With 8. Shared Dispositive Power: 4,377	
		con: 4 277
9.	Aggregate Amount Beneficially Owned by each Reporting Per	
10. ——	Check Box if the Aggregate Amount in Row 9 excludes Certa	ın Shares:
11.	Percent of Class Represented by Amount in Row 9: 0.00 %	
12.	Type of Reporting Person: IC	
Sch	edule 13G Page	of Pages

CUSI	P No579780206
1.	Name of Reporting Person and I.R.S. Identification No.: State Farm Investment Management Corp.
2.	Check the appropriate box if a Member of a Group (a) (b)X
3.	SEC USE ONLY:
4.	Citizenship or Place of Organization: Delaware
Num Sha	ber of 5. Sole Voting Power: 428,600 res
Ben	eficially 6. Shared Voting Power: 5,523
Eac	h 7. Sole Dispositive Power: 428,600
	ortingson With 8. Shared Dispositive Power: 5,523
9.	Aggregate Amount Beneficially Owned by each Reporting Person: 434,123
10.	Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:
11.	Percent of Class Represented by Amount in Row 9: 0.36 %
12.	Type of Reporting Person: IA
Sch	edule 13G Page of Pages 11
CUSI	P No579780206
1.	Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Employee Retirement Trust 36-6042145
2.	Check the appropriate box if a Member of a Group (a) (b)X
3.	SEC USE ONLY:
4.	Citizenship or Place of Organization: Illinois
Num	ber of 5. Sole Voting Power: 3,232,000
	res eficially 6. Shared Voting Power: 4,308 ed by
Eac	h 7. Sole Dispositive Power: 3,232,000
	ortingson With 8. Shared Dispositive Power: 4,308
9.	Aggregate Amount Beneficially Owned by each Reporting Person: 3,236,308
10.	Check Box if the Aggregate Amount in Row 9 excludes Certain Shares:
11.	Percent of Class Represented by Amount in Row 9: 2.69 %
12.	Type of Reporting Person: EP
Sch	edule 13G Page of Pages 7 11
CUSI	P No579780206
1.	Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823
2.	Check the appropriate box if a Member of a Group (a) (b)X
3.	SEC USE ONLY:
4.	Citizenship or Place of Organization: Illinois
Num Sha	ber of 5. Sole Voting Power: 448,400 res

Beneficially 6. Owned by Each 7. Reporting			6.	Shar	red \	Voti	ing F	Pow	er:	0												
			7.	Sole	e Dis	spos	sitiv	/e	Pow	er:	448	3,40	0									
	son W		8.	Shared Dispositive Power: 0																		
9.	. Aggregate Amount Beneficially Owned by each Reporting Person: 448,400																					
10.	Chec	k Box	k if	the	Aggı	rega	ate A	\mo	unt	in	Row	v 9	exc	- cluc	des	Cer	tai	n S	hare	es:		
11.	Perc	ent c	of Cl	ass.	Rep	rese	ented	d b	y A	nou	nt i	ln R	OW	9:	0.3	37	%					
12.	Туре	of F	Repor	tinç	g Per	rsor	n: EF	<u> </u>						-								
Sche	edule	13G												Paç	ge _	8	_ 0	f _	11	_ P	age	es
Item	1(a)	and	(b).	Na —	ame a	and	Addr	es	s o	f Is	ssue	er &	. Pr	rind	cipa	al E	xec	uti	.ve (Off	ice	es:
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Item	2(a)	. Na	ame o	f Pe	ersoi	n Fi	ilinç	g:	Sta	te I	arm	n Mu	tua	al A	Auto	omob	ile	In	sura	anc	e	
		_										nd r Lt A		ateo	d er	ntit	ies	;	See	Ιt	em	8
Item	2(b)	. Ac	ddres	s of	f Pr	inci	ipal	Bu	sin	ess	0ff	ice	: c	ne	Sta	ite	Far	m P	laza	a		
		_											E	3100	omir	igto	n,	IL	6171	10		
Item	2(c)	. Ci	itize	nshi	ip: l	Unit	ed S	Sta	tes													
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ıtem	2(a)	and	(e).	—	rtie	0Т	Clas	SS	от :	Seci	ırıt	ies	ar	1a (Jus1	_р м	umb	er: —	See	e a	lbov	/e.
Item	3.	This	Sche	dule	e is	bei	ing f	il	ed,	in	acc	ord	anc	ce v	vith	1 24	0.1	3d-	1(b)) .		
		See E	Exhib	it A	۱ at	tach	ned.															
Item	4(a)	. An	nount	Ber	nefic	cial	lly (Own	ed:	9,2	288,	862	sh	nare	es							
Item	4(b)	. Pe	ercen	t of	f Cla	ass:	: 7.7	71	per	cent	pu	ırsu	ant	t to) Ru	ıle	1 3d	-3(d)(1	1).		
Item	4(c)	. Nu	umber	of	shai	res	as t	0	whi	ch s	such	n pe	rsc	on I	nas:							
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Item	5.	0wner	rship	of	Five	е Ре	ercer	nt	or .	les	s of	⁼ a	Cla	ass:	: No	t A	.ppl	ica	ble			
Item	6.	0wner	rship	of	More	e th	nan F	iv	е Р	erce	ent	on	Beh	nali	f of	⁼ An	oth	er	Pers	son	n: N -	I/A
Item	7.	Ident	tific	atio	on ai	nd (Class	sif	ica	tio	n of	⁼ th	e S	Subs	sidi	lary	Wh	ich	Aco	qui	rec	t
		the S	Secur	ity	bei	ng F	Repor	te	d o	n by	/ th	ne P	are	ent	Hol	Ldin	g C	omp	any	: N	I/A	_
Item 8. Identification and Classification of Members of the Group:																						
		See E	Exhib	it A	att	tach	ned.												-			
Item	9.	Notio	ce of	Dis	ssolı	utio	on of	G	rou	p:	N/A	4										
Sche	edule	13G						-		_				Paç	ge _	9	_ 0	f_	11	_ P	age	es

my knowledge and belief, the securities referred to above were acquired in the ordinary course of business and were not acquired for the purpose of and do not have the effect of changing or influencing the control of the issuer of such securities and were not acquired in connection with or as a participant in any transaction having such purpose or effect.

Signature

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date

STATE FARM MUTUAL AUTOMOBILE

INSURANCE COMPANY

STATE FARM LIFE INSURANCE COMPANY

STATE FARM FIRE AND CASUALTY COMPANY

STATE FARM INSURANCE COMPANIES EMPLOYEE RETIREMENT TRUST

STATE FARM INSURANCE COMPANIES SAVINGS AND THRIFT PLAN FOR U.S. EMPLOYEES STATE FARM INVESTMENT MANAGEMENT CORP.

STATE FARM ASSOCIATES FUNDS
TRUST - STATE FARM GROWTH FUND

STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM BALANCED FUND

STATE FARM MUTUAL FUND TRUST

/s/ Paul N. Eckley

Paul N. Eckley, Fiduciary of each of the above Schedule 13G /s/ Paul N. Eckley

Paul N. Eckley, Vice President of each of the above
Page _____ of ____ Pages
10 11

EXHIBIT A

This Exhibit lists the entities affiliated with State Farm Mutual Automobile Insurance Company ("Auto Company") which might be deemed to constitute a "group" with regard to the ownership of shares reported herein.

Auto Company, an Illinois-domiciled insurance company, is the parent company of multiple wholly owned insurance company subsidiaries, including State Farm Life Insurance Company, and State Farm Fire and Casualty Company. Auto Company is also the parent company of State Farm Investment Management Corp. ("SFIMC"), which is a registered transfer agent under the Securities Exchange Act of 1934 and a registered investment advisor under the Investment Advisers Act of 1940. SFIMC serves as transfer agent and investment adviser to State Farm Associates' Funds Trust, State Farm Variable Product Trust, and State Farm Mutual Fund Trust, three Delaware Business Trusts that are registered investment companies under the Investment Company Act of 1940. Auto Company also sponsors two qualified retirement plans for the benefit of its employees, which plans are named the State Farm Insurance Companies Employee Retirement Trust and the State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees (collectively the "Qualified Plans").

As part of its corporate structure, Auto Company has established an Investment Department. The Investment Department is directly or indirectly responsible for managing or overseeing the management of the investment and reinvestment of assets owned by each person that has joined in filing this Schedule 13G. Moreover, the Investment Department is responsible for voting proxies or overseeing the voting of proxies related to issuers the shares of which are held by one or more entities that have joined in filing this report. Each insurance

company included in this report and SFIMC have established an Investment Committee that oversees the activities of the Investment Department in managing the firm's assets. The Trustees of the Qualified Plans perform a similar role in overseeing the investment of each plan's assets.

Pursuant to Rule 13d-4 each person listed in the table below expressly disclaims "beneficial ownership" as to all shares as to which such person has no right to receive the proceeds of sale of the security and disclaims that it is part of a "group".

Schedule 13G		of Pages
	13	1 11
		Number of
		Shares based
	Classification	n on Proceeds
Name	Under Item 3	of Sale
	-	
State Farm Mutual Automobile Insurance Compa	ny IC	4,920,378 shares
State Farm Life Insurance Company	IC	245,276 shares
State Farm Fire and Casualty Company	IC	4,377 shares
State Farm Investment Management Corp.	IA	5,523 shares
State Farm Associates Funds Trust - State		
Farm Growth Fund	IV	428,600 shares
State Farm Associates Funds Trust - State Farm Balanced Fund	TV	O oboroo
State Farm International Life Insurance	IV	0 shares
Company Ltd.	IV	0 shares
State Farm Insurance Companies Employee	I V	o shares
Retirement Trust	EP	3,236,308 shares
State Farm Insurance Companies Savings and		.,,
Thrift Plan for U.S. Employees	EP	
Equities Account		448,400 shares
Balanced Account		0 shares
State Farm Mutual Fund Trust	IV	0 shares
		0.000.0001
		9,288,862 shares