SKELTON ROBERT W

Form 5

January 14, 2005

OMB APPROVAL FORM 5 **OMB**

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

Check this box if no longer subject to Section 16. ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form

5 obligations may continue. See Instruction

OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b).

Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4

Transactions Reported

1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer SKELTON ROBERT W Symbol MCCORMICK & CO INC [MKC] (Check all applicable) (First) 3. Statement for Issuer's Fiscal Year Ended (Last) (Middle) (Month/Day/Year) Director 10% Owner _ Officer (give title X Other (specify 11/30/2004 below) below) MCCORMICK & COMPANY, Senior Vice President, General INCORPORATED, Â 18 LOVETON **CIRCLE** (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line)

SPARKS, MDÂ 21152

(State)

(Zip)

(City)

X Form Filed by One Reporting Person Form Filed by More than One Reporting

Table I Non Derivative Securities Acquired Disposed of ar Repeticially Owned

(- 3)	()	1 adi	e I - Non-Deri	ivative Se	curitie	es Acqu	iirea, Disposea oi	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi Acquired Disposed (Instr. 3,	d (A) of (D) 4 and (A) or))	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock - Voting	Â	Â	Â	Â	Â	Â	66,442.7	D	Â
Common Stock - Voting	Â	Â	Â	Â	Â	Â	11,317.421 (1)	I	Profit Sharing Plan

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless **SEC 2270** (9-02)

3235-0362

January 31,

2005

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Number:

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

	1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	Date Exerc	cisable and	7. Title	and	8. Price of	
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration Da	ate	Amoun	t of	Derivative	
	Security	or Exercise	•	any	Code	of	(Month/Day/	Year)	Underly	ying	Security	
(Instr. 3)		Price of		(Month/Day/Year)	(Instr. 8)	Derivative		Se	Securiti	Securities	(Instr. 5)	
	Derivative					Securities			(Instr. 3 and 4)			
Security		Security				Acquired						
						(A) or						
						Disposed						
						of (D)						
						(Instr. 3,						
						4, and 5)						
									4	Amount		
										or		
						Date	Expiration		Number			
							Exercisable	Date	of			
						(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

SKELTON ROBERT W MCCORMICK & COMPANY, INCORPORATED 18 LOVETON CIRCLE SPARKS. MDÂ 21152

Â Â Senior Vice President, General Â

Signatures

W. Geoffrey Carpenter, Attorney-in-fact 01/14/2005

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).

Shares held in the McCormick Profit Sharing Plan as of 11/30/04. The reporting person owns units in the McCormick Stock Fund in the (1) Profit Sharing Plan and the number of shares reported as beneficially owned is based on the reporting person's pro rata interest in the net asset value of the McCormick Stock Fund on the date indicated.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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