Edgar Filing: LEGG MASON INC - Form 4

LEGG MASC	ON INC										
Form 4											
June 13, 2007	7										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box									Expires:	January 31,	
subject to	subject to				GES IN BENEFICIAL OWNERSHIP (Estimated	2005 average	
Section 16		SECURITIES							burden hours per		
Form 4 or Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	. 0.5	
obligation	- · · · · · · · · · · · · · · · · · · ·	^						-	-		
may contin	nue. Section) of the In	•	.	• •		of 1935 or Sectio	n		
See Instruc	ction	50(II)) of the m	vestment	company	Act	. 01 19	40			
1(b).											
(Print or Type R	esponses)										
1. Name and Ac	ldress of Report	ing Person [*]	2. Issuer	2. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to			
BAIN PETER L			Symbol					Issuer			
			LEGG N	MASON I	NC [LM]]		(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	insaction			(Clied	ck all applicabl	c)	
(]			(Month/D	(Month/Day/Year)				Director 10% Owner X Officer (give title Other (specify below) below)			
			06/11/2007								
ST								· · · · · · · · · · · · · · · · · · ·	utive Vice Pres	ident	
	(Street)		4. If Ame	ndment. Dat	e Original			6. Individual or J	oint/Group Fili	ng(Check	
				4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
				•				_X_ Form filed by			
BALTIMOR	E, MD 21202	2						Form filed by M Person	More than One R	eporting	
(City)	(State)	(Zip)									
(City)	(blute)	(Elp)	Table	e I - Non-Do	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of								5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Y	ear) Executi any	on Date, if	TransactionAcquired					Form: Direct (D) or	Indirect Beneficial	
			/Day/Year)	1 ()				Owned	Indirect (I)	Ownership	
			•					Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
						or		(Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price				
Common Stock								29,024	D		
STOCK											

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 the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Perivative Expiration Date ecurities (Month/Day/Year) acquired (A) r Disposed of D) instr. 3, 4,		Underlying Securities (Instr. 3 and 4)		8. Pr Deri Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock (1)	(2)	06/11/2007		А	676.01	(1)	(1)	Common Stock	676.01	\$ 8

Reporting Owners

Reporting Owner Name / Address	s Relationships							
	Director	10% Owner	Officer	Other				
BAIN PETER L LEGG MASON INC 100 LIGHT ST BALTIMORE, MD 21202			Sr. Executive Vice President					
Signatures								
/s/ Erin L. Clark, Attorney-in-f Bain	act for Pe	ter L.	06/13/2007					

**Signature of Reporting Person

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).
- (1) Phantom stock units acquired pursuant to and under the conditions of the Legg Mason & Co., LLC Deferred Compensation/Phantom Stock Plan, as amended. See Exhibit 10.7 of Form 10-K for the fiscal year ended March 31, 2006.

Date

(2) 1-for-1

Note: File three copies of this Form, one of which must be manually signed. If space 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.