## Edgar Filing: LEGG MASON INC - Form 4

LEGG MASC	ON INC										
Form 4											
July 20, 2007											
FORM	4									PPROVAL	
	- UNITEI	DSTATES		hington,			NGE	COMMISSION	OMB Number:	3235-0287	
Check this	s box		vv a5	inington,	D.C. 203	) <b></b> /				January 31,	
if no longe	er STATE	EMENT O	F CHAN	GES IN F	BENEFI	CIAI	LOW	NERSHIP OF	Expires:	2005	
subject to Section 16		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated average burden hours per			
Form 4 or									response 0.5		
Form 5	Filed p	ursuant to	Section 16	6(a) of the	e Securiti	es Ex	kchang	ge Act of 1934,			
obligation may contin				•	•	- ·		of 1935 or Sectio	n		
<i>See</i> Instruct 1(b).		30(h)	) of the Inv	vestment	Company	y Act	of 19	40			
(Print or Type R	esponses)										
	dress of Reportin	ng Person <u>*</u>	2. Issuer	Name <b>and</b>	Ticker or T	Fradin	g	5. Relationship of	Reporting Per	rson(s) to	
FETTING M	Symbol	5				Issuer					
			LEGG MASON INC [LM]					(Check all applicable)			
(Last)	(First)	(Middle)		Earliest Tra	ansaction						
LEGG MASON, INC., 100 LIGHT			(Month/Day/Year) 07/18/2007					Director X Officer (give	title 10% Owner		
STREET	ON, INC., 100	LIGHT	0//18/20	107				below)	below)		
STREET								Sr. Execu	tive Vice Pres	ident	
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
BALTIMOR	E, MD 21202							Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of	2. Transaction D			3.	4. Securit				6. Ownership		
Security (Instr. 3)	(Month/Day/Yes	ar) Executi-	on Date, if	Code	onAcquired Disposed				Form: Direct (D) or	Indirect Beneficial	
(		•	/Day/Year)		(Instr. 3,			Owned	Indirect (I)	Ownership	
								U	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common					2 mioulit		11100	26.221	D		
Stock								26,231	D		

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. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Stock Options Right to Buy <u>(1)</u>	\$ 100.77	07/18/2007		А	45,000	07/18/2008 <u>(1)</u>	07/17/2015	Common Stock	45,000

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	Director 10% Owner Officer		Other			
FETTING MARK R LEGG MASON, INC. 100 LIGHT STREET BALTIMORE, MD 21202			Sr. Executive Vice President				
Signatures							
/s/ Erin L. Clark, Attorney-in-fact for Mark R.							
Fetting			07/20/2007				
<u>**</u> Signature of Reporting	Person		Date				
Explanation of Responses:							
* If the form is filed by more than one reporting person, <i>see</i> 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) Stock options vest serially over 5 years commencing on July 18, 2008.

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.