## Edgar Filing: LEGG MASON INC - Form 4

LEGG MASO	N INC										
Form 4											
July 21, 2009											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								PPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB	3235-0287			
	1		Was	hington,	D.C. 205	549		Number:			
if no longer	Check this box						Expires:	January 31,			
subject to	STAT	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							2005 Estimated average		
Section 16.		SEV HIDPPHES							burden hours per		
Form 4 or								response	•		
Form 5	Filed J	pursuant to	Section 16	6(a) of the	e Securiti	es Exchan	ge Act of 1934,				
obligations may continue. Section 17(a) of the Public Utility Holding Company Act of 1935 or Section											
See Instruc		30(h)	of the Inv	vestment (	Company	y Act of 19	940				
1(b).											
(Print or Type Re	sponses)										
1. Name and Ad	dress of Reporti	ing Person <sup>*</sup>	2. Issuer	Name and	Ticker or 7	Frading	5. Relationship of	f Reporting Per	Reporting Person(s) to		
BERESFORD DENNIS R			Symbol			Issuer					
			LEGG MASON INC [LM]								
(Last) (First) (Middle)			3. Date of Earliest Transaction			(Check all applicable)					
LEGG MASON, INC., 100 LIGHT STREET				•••			X Director	109	6 Owner		
			(Month/Day/Year) 07/17/2009			Officer (give title Other (specify below) below)					
			0//1//2009								
STREET											
(Street)				4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
				Applicable Line)							
_X_Form filed by O						Iore than One Reporting					
BALTIMORI	E, MD 21202	2					Person		epotting		
(City)	(State)	(Zip)	Tabl	I Nee D	<b>:</b>			f an Danafiaia	ller Oerre e d		
× •/		× 1/	1 2016	e I - Non-Do	erivative S	ecurities Ac	equired, Disposed o	i, or Beneficia	lly Owned		
	2. Transaction			3.	4. Securit		5. Amount of		7. Nature of		
Security (Instr. 3)	(Month/Day/Y		on Date, if	Transactic Code	onAcquired Disposed		Securities	Form: Direct	Indirect Beneficial		
(Instr. 5)		any (Month	/Day/Year)	(Instr. 8)	(Instr. 3,		Beneficially Owned	(D) or Indirect (I)	Ownership		
		(intolitie	Duj, Iour)	(111541: 0)	(11511.5,	( und 5)	Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported				
						(A) or	Transaction(s)				
				Code V	Amount		(Instr. 3 and 4)				
Common							0.050	D			
Stock							2,250	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)	4. 5. Number Transaction Code Derivative (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4,		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pric Deriva Securi (Instr.
			Code V	and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units (1)	(2)	07/17/2009	А	9.46	(1)	<u>(1)</u>	Common Stock	9.46	\$ 24

## **Reporting Owners**

Reporting Owner Name / Address		Relationsh		
	Director	10% Owner	Officer	Other
BERESFORD DENNIS R LEGG MASON, INC. 100 LIGHT STREET BALTIMORE, MD 21202	Х			
Signatures				
/s/ Erin L. Clark, Attorney-in-f. Beresford		07/21/2009		
**Signature of Reporting		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).
- Restricted Stock Units granted pursuant to and under the conditions of the Legg Mason, Inc. Non-Employee Director Equity Plan, as (1) amended. See Appendix C to the definitive proxy statement for Legg Mason, Inc.'s 2007 Annual Meeting of Stockholders.
- (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.