Edgar Filing: LEGG MASON INC - Form 4

LEGG MASO	ON INC												
Form 4													
July 29, 2010													
FORM	4		~ ~ ~ ~ ~ ~							OMB APPROVAL			
UNITED STATES SECURITIE					TES AND EXCHANGE COMMISSION ngton, D.C. 20549					3235-0287			
Check this			Expires:	January 31,									
if no long subject to	F CHAN	F CHANGES IN BENEFICIAL OWNERSHIP O						2005					
Section 10	SECURITIES							Estimated average burden hours per					
Form 4 or	•								response	•			
Form 5 obligation		•						ge Act of 1934,					
may conti				•	•	• •		of 1935 or Sectio	n				
See Instru		30(h)	of the Inv	vestment	Company	y Act	of 19	40					
1(b).													
(Print or Type R	esponses)												
1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of						•	f Reporting Per	son(s) to					
KRONGARD CHERYL GORDON Symbol Issuer						155001							
	LEGG N	AASON I	NC [LM]		(Check all applicable)							
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction								
				Month/Day/Year)				X_ Director 10% Owner Officer (give title Other (specify					
	ON, INC., 10		07/27/20)10				below)	below)	er (specify			
INTERNAT	IONAL DRIV	∕E											
(Street) 4.			4. If Amer	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check					
	Filed(Mon	th/Day/Year)				Applicable Line)							
								X Form filed by Form filed by N	One Reporting Po More than One R				
BALTIMOR	RE, MD 21202	2						Person		-r8			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned			
1.Title of	2. Transaction	Date 2A. Dee	emed	3.	4. Securi			5. Amount of	6. Ownership	7. Nature of			
Security	(Month/Day/Y		on Date, if TransactionAcquired (A) or Code Disposed of (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					Securities	Form: Direct	Indirect			
(Instr. 3)		any (Month						Beneficially Owned	Indirect (I) Owners	Beneficial Ownership			
		(infolial	(Hist. 6) (Hist. 6) (Hist. 6, Fund 6)			2)	Following	(Instr. 4)					
						(A)		Reported					
						or		Transaction(s) (Instr. 3 and 4)					
				Code V	Amount	(D)	Price	(msu: 5 and 4)					
Common	07/27/2010			А	4,226	А	\$0	13,651	D				
Stock (1)					,		, .						

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. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day, e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationsh					
	Director	10% Owner	Officer	Other			
KRONGARD CHERYL GORDON LEGG MASON, INC. 100 INTERNATIONAL DRIVE BALTIMORE, MD 21202	Х						
Signatures							
/s/ Thomas C. Merchant, Attorney-in Krongard		07/29/2010					
<u>**</u> Signature of Report	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).

(1) Common Stock granted pursuant to and under the conditions of the Legg Mason, Inc. Non-Employee Director Equity Plan, as amended.

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.