## BAIN PETER L Form 4 April 15, 2003

# FORM 4

[ ] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, DC 20549

## STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL OMB Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the response......0.5 Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

#### (Print or Type Responses)

1. Name and Address of Reporting Person*	2. Issuer N	ame <b>and</b> Ticl	ker or Trading	g Symbol	6. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Bain Peter L.		Legg Mas	on, Inc. (L	M)		Director 10% Owner Officer X Other (specify (give below) title below)					
			-		Executive Vice President						
(Last) (First) (Middle)	Number	lentification of Reporting f an entity ry)				7. Individual or Joint/Group Filing (Check Applicable Line)					
100 Light Street			5. If Amendment, Date of Original (Month/Day/Year)			X	Form filed by One Reporting Person				
(Street)							Form filed by More than One Reporting Person				
Baltimore, Maryland 21202											
(City) (State) (Zip)	1	ſable I − N	on-Derivativ	e Securiti	ies Ac	quired	, Disposed of, or Be	neficially Ov	vned		
1. Title of Security (Instr. 3)	2. Trans- action Date (Month/ Day/ Year)	Deemed Execution Date, if any (Month/ Day/ Year)	3. Trans- action Code (Instr.8)	4. Securit (A) or Disp (Instr.	posed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Owner- ship Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Owner- ship (Instr. 4)		
Common Stock							7,213	D			

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

If the form\* is filed by more than one reporting person, see Instruction 4(b)(v).

Persons who respond to the collection of (Over) information contained SEC 1474 in this form are not required to respond unless the (9-02) form displays

a currently valid OMB control number.

FORM 4 (continued)	Table II — Derivative Securities Acquired, Disposed of, or Beneficially Owned         (e.g., puts, calls, warrants, options, convertible securities)														
1. Title of Derivative Security (Instr. 3)	2. Conver- sion or Exercise Price of Deri- vative Security	action Date	- 3A. Deemed Execution Date, if any (Month/ Day/ Year)	4. Trans- action of I Code a (Instr.8)Sec Ac- (A) Dis F of (			Number 6. Date E Deriv- cisable tive Expira urities Date - (Montl puired Year) or 		le and ation h/Day/	of Underly Securities	Underlying		9. Number of deriv- ative Secur- ities Bene- ficially Owned Follow- ing Reported Trans- action(s)	10. Owner- ship Form of Deri- vative Security: Direct (D) or Indirect (I) (Instr. 4)	<ol> <li>Nature of Indirect Benefi- cial Owner- ship (Instr.</li> <li>4)</li> </ol>
				Code	v	(A)	(D)	Exer-	Expira- tion Date	Title	Amount or Number of Shares		(Instr. 4)		
Stock Options (Right to Buy)	\$39.46								07/22/10				14,000	D	
Stock Options (Right to Buy)	\$49.03								07/22/09				25,000	D	
Stock Options (Right to Buy)	\$52.90								07/22/08				25,000	D	
Phantom Stock (1)	(2)	4/11/03		A		5.35				Common Stock	5.35	\$48.5051	2366.37	D	

Explanation of Responses:

(1) Phantom Stock acquired pursuant to the Legg Mason Wood Walker, Incorporated

Deferred Compensation Phantom Stock Plan.

(2) 1-for-1

78ff(a).

\*\*

/s/ Thomas C. Merchant\* \*\*Signature of Reporting Person 04/15/03

Date

\*Attorney-in-Fact

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

See18 U.S.C. 1001 and 15 U.S.C.

Intentional misstatements or omissions of facts constitute Federal

Criminal Violations.

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.