UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPRO	OVAL
OMB Number:	3235-0287
Estimated average but	ırden
hours per response	0.5

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* WILSON W KEITH					2. Issuer Name and Ticker or Trading Symbol CONSTELLATION BRANDS, INC. [STZ/STZ.B]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Exec VP & Chief Admin Officer				
(Last) (First) (Middle) C/O CONSTELLATION BRANDS, INC., 370 WOODCLIFF DRIVE, SUITE 300					3. Date of Earliest Transaction (Month/Day/Year) 04/01/2008										
(Street) FAIRPORT, NY 14450				4. If A	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City		(State)	(Zip)			Tal	ble I - No	on-Deriv	ative Securitie	Acquir	ed, Disposed	of, or Benefi	cially Owned		
(Instr. 3) Date		2. Transaction Date (Month/Day/Ye	ear) Exe	ar) any		Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Owned Following Transaction(s)		j	6. Ownership Form:	Beneficial	
				(MC	onth/Day/Yea		Code	V Aı	(A) or (D)	Price	(I)		or Indirect	Ownership (Instr. 4)	
Class A C	Common S	tock	04/01/2008				A	15	,200 A	\$ 0 1	5,200			D	
Reminder: R	Report on a se	eparate fine for each			,		th	nis form	who respond are not requi	red to re	espond un			n SEC	1474 (9-02)
1. Title of	2.	3. Transaction	Table 3A. Deemed	II - Deri (<i>e.g.</i> ,	ivative Securi , puts, calls, v	arrar er of	cquired,	nis form urrently , Dispose ons, conv	are not requivalid OMB conditions of the conditi	red to recontrol nuclearly Oves) 7. Title	espond un umber. vned	8. Price o	f 9. Number of	f 10.	11. Natu
	2. Conversion	3. Transaction	Table 3A. Deemed Execution Date, if	II - Deri (e.g., 4. Transac Code	ivative Securi, puts, calls, v 5. Numb	er of ve s l (A) sed of	cquired, nts, optio 6. Date Expirat (Month	nis form urrently , Dispose ons, conv	are not requivalid OMB cond of, or Benefit ertible securitiable and	cially Oves) 7. Title of Und Securit	espond unumber. vned e and Amounderlying	8. Price o	n displays a	of 10. Owners: Form of Derivation Security Direct of India	11. Natu ship of Indire f Benefici ive Ownersh y: (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table 3A. Deemed Execution Date, if any	II - Deri (e.g., 4. Transac Code	ivative Securi, puts, calls, v 5. Numb Contribution Securitie Acquires or Dispoc (D) (Instr. 3,	er of ve s l (A) sed of	cquired, nts, optio 6. Date Expirat (Month)	nis form urrently , Dispose ons, conv e Exercise tion Date n/Day/Ye	are not requivalid OMB cond of, or Benefit ertible securitiable and	cially Oves) 7. Title of Und Securit	espond unumber. vned e and Amounterlying ties	8. Price of Derivative Security (Instr. 5)	f 9. Number of Derivative Securities Beneficially Owned Following Reported	of 10. Owners: Form of Derivation Security Direct of India	11. Nature of Indire Beneficitive Ownersh (Instr. 4)

			Relationships	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
WILSON W KEITH C/O CONSTELLATION BRANDS, INC. 370 WOODCLIFF DRIVE, SUITE 300 FAIRPORT, NY 14450			Exec VP & Chief Admin Officer	

Signatures

H. Elaine Ziakas For: W. Keith Wilson	04/03/2008
**Signature of Reporting Person	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.
- (1) This option becomes exercisable at the rate of 25% per year beginning on the date specified.

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.