FORM 4

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

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						
hours per response	0.5					

Check this box if no 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

pe Responses)															
Name and Address of Reporting Person * Fernandez Jose F					2. Issuer Name and Ticker or Trading Symbol CONSTELLATION BRANDS, INC. [STZ/STZ.B]						B]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(First) (Middle) C/O CONSTELLATION BRANDS, INC., 207 HIGH POINT DR., BLDG. 100				3. Date of Earliest Transaction (Month/Day/Year) 04/06/2009								X Officer (give title below) Other (specify below) CEO, Constell Wines N. Amer.				
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_	6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person September 1. September 1					
												Tomi med by wio	e than one kep	orting rerson		
y)	(State)	(Zip)				Tab	le I - N	on-Deriv	ative !	Securities	Acquired	l, Disposed of	or Benefic	ially Owned		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea			ear) any		Code (Instr. 8)		(A	(A) or Disposed of (D)		(D) Ow Tra	Owned Following Reported Transaction(s)) I	Ownership Form:	7. Nature of Indirect Beneficial Ownership	
			(IVI)	(Month/Day/Yea		C	Code	V Ar	Amount (A) or (D)			nisu. 3 anu 4)		oı (I	r Indirect (
Class A Common Stock 04/06/2009							A	34	,580	A :	\$ 0 62	,409 (1)])	
		Table					cı	urrently , Dispose	valid d of, o	OMB cor or Benefici	ntrol nui	nber.				
	Exercise (Month/Day/Year) any (Month/Day/Year) irvative	Execution Date, if any	4. 5. Number Transaction Derivative Code Securities (Instr. 8) Acquired (. or Dispose (D)			(A) ed of	of b. Date Exercisable and Expiration Date (Month/Day/Year) S. A.) d of [I				7. Title a of Under Securities	Underlying Derivative Security		Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect	
				Code	Code V (A)		(D)	Date Exercis	sable			Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)
	and Address of bez Jose F st) NSTELLAT DINT DR., St., NY 1456- sty) Gecurity Common St Report on a sc 2. Conversion or Exercise Price of Derivative	and Address of Reporting Person* Ez Jose F St) (First) NSTELLATION BRANDS, DINT DR., BLDG. 100 (Street) St., NY 14564 Sty) (State) Gecurity Common Stock Report on a separate line for each 2. Conversion or Exercise Price of Derivative Derivative 3. Transaction Date (Month/Day/Year)	and Address of Reporting Person 22 Jose F st) (First) (Middle) NSTELLATION BRANDS, INC., 207 DINT DR., BLDG. 100 (Street) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year)	and Address of Reporting Person* 2. Is: 2z Jose F St) (First) (Middle) NSTELLATION BRANDS, INC., 207 DINT DR., BLDG. 100 (Street) 4. If A 2s, NY 14564 Security 2. 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Reporting Owners

		Relationships						
	Reporting Owner Name / Address		10% Owner	Officer	Other			
C/O 207	nandez Jose F CONSTELLATION BRANDS, INC. HIGH POINT DR., BLDG. 100 TOR, NY 14564			CEO, Constell Wines N. Amer.				

Signatures

H. Elaine Ziakas for Jose Fernandez	04/08/2009
**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. 78ff(a).

- (1) Includes shares of Class A Common Stock acquired on July 31, 2008 and January 31, 2009 under the Constellation Brands, Inc. 1989 Employee Stock Purchase Plan.
- (2) 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.