## FORM 4

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

OMB APPROVA	AL.
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

 $\label{eq:company} Filed \ pursuant \ to \ Section \ 16(a) \ of \ the \ Securities \ Exchange \ Act \ of \ 1934 \ or \ Section \ 30(h) \ of \ the \ Investment \ Company \ Act \ of \ 1940$ 

(Print or Type Responses)  1. Name and Address of Reporting Person* SANDS RICHARD  (Eirst) (Middle) C/O CONSTELLATION BRANDS, INC., 207 HIGH POINT DRIVE, BUILDING 100					Issuer Name and Ticker or Trading Symbol CONSTELLATION BRANDS, INC. [STZ]     Date of Earliest Transaction (Month/Day/Year) 04/21/2020						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X_ Director X_ Officer (give title below)  Vice Chairman of the Board				
(Street) VICTOR, NY 14564				4. 1	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person				
(City) (State) (Zip)					Table I - Non-Derivative Securities Acqu					rities Acquire	lired, Disposed of, or Beneficially Owned				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y				) any	Deemed cution Date, nth/Day/Yea	if C	. Transaction Code Instr. 8)	4. Securities Ac (A) or Disposed (Instr. 3, 4 and	of (D)	5. Amount of Securities Benefi Owned Following Reported Tr (Instr. 3 and 4)		nsaction(s)	6. Ownership Form: Direct (D) or Indirect	Beneficial Ownership	
								Code V	Amount (A)				(	I) Instr. 4)	(
											llection of infor			SEC	1474 (9-02)
			Ta					this fo	rm are not red atly valid OMB cosed of, or Ben	quired to res control nui eficially Owi	spond unless the mber.			SEC	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Ta 3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code	(e.g.,		of A) d of	this fo	rm are not recutly valid OMB posed of, or Ben onvertible secuble and	quired to res control nui eficially Owi	spond unless thember.  ned  Amount of Securities	e form dis	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	Form of Derivati Security Direct (I or Indirect) (I)	11. Natur of Indire Beneficia Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transa Code	(e.g.,	puts, calls, 5. Number Derivative Securities Acquired (. or Dispose (D) (Instr. 3, 4, and 5)	of A) d of	s Acquired, Disprants, options, of 6. Date Exercisa Expiration Date	rm are not recutly valid OMB posed of, or Ben onvertible secuble and	eficially Ownrities) 7. Title and a Underlying S	spond unless thember.  ned  Amount of Securities	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following Reported	10. Owners: Form of Derivati Security Direct (lor Indire	11. Natur of Indire Beneficia Ownersh (Instr. 4)

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SANDS RICHARD C/O CONSTELLATION BRANDS, INC. 207 HIGH POINT DRIVE, BUILDING 100 VICTOR, NY 14564	X	X	Vice Chairman of the Board			

### **Signatures**

/s/ H. Elaine Ziakas for Richard Sands	04/23/2020
**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) This option becomes exercisable at the rate of 25% per year beginning on the date specified.

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

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.