

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

OMB APP	ROVAL			
OMB Number:	3235-0104			
Estimated average burden				
nours per response				

INITIAL STATEMENT OF 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

(Print or Type Responses)									
Name and Address of Reporting Person* Kane Thomas Michael	2. Date of Event Requiring Statement (Month/Day/Year) — 05/20/2013			3. Issuer Name and Ticker or Trading Symbol CONSTELLATION BRANDS, INC. [STZ]					
(Last) (First) (Middle) C/O CONSTELLATION BRANDS, INC., 207 HIGH POINT DRIVE, BUILDING 100			Issuer (ChecDirectorXOfficer (give	(Check all applicable)			5. If Amendment, Date Original Filed(Month/Day/Year)		
VICTOR, NY 14564							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 Beneficially Owned								
1.Title of Security (Instr. 4)	y 2. Amount of Beneficially O (Instr. 4)				Fo (D (I)	orm: Direct O) or Indirect	. Nature of Indirect Beneficial Ownership Instr. 5)		
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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year)		sable	3. Tit	le and Amount of rities Underlying Derivat rity	tive	4. Conversion	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
Dat Exe	ate Exercisable D	xpiration ate	Title	Amount or Number of Shares		Security	(D) or Indirect (I) (Instr. 5)		
Reporting Owners									

		Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Kane Thomas Michael C/O CONSTELLATION BRANDS, INC. 207 HIGH POINT DRIVE, BUILDING 100 VICTOR, NY 14564			Executive VP, Chief HR Officer			

Signatures

/s/ Thomas M. Kane	05/28/2013
***Signature of Reporting Person	Date

Explanation of Responses:

No securities are beneficially owned

- If the form is filed by more than one reporting person, see Instruction 5(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).

Remarks:

No securities are beneficially owned.

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 of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of th	ber.