## FORM 4

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

OMB A	PPROVAL					
OMB Number: 3235-02						
Estimated average burden						
hours per respo	nse 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

(Print or Type	e Responses)																
1. Name and Address of Reporting Person* HETTERICH F PAUL  (Last) (First) (Middle) C/O CONSTELLATION BRANDS, INC., 207 HIGH POINT DRIVE, BUILDING 100				2. Issuer Name and Ticker or Trading Symbol CONSTELLATION BRANDS, INC. [STZ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
				3. Date of Earliest Transaction (Month/Day/Year) 04/28/2015							_X_0	X Officer (give title below) Other (specify below)  EVP, Corp Dev & Beer Ops					
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting PersonForm filed by More than One Reporting Person					
VICTOR, NY 14564 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqui								ired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye		2A. Deemed Execution Date, if ary (Month/Day/Year)		Date, if	(Instr. 8)		(A) c	curities Acquire or Disposed of ( c. 3, 4 and 5)  (A) or (D) F	D) Owned Transac	Owned Following Reported Transaction(s) (Instr. 3 and 4)		C F I C	Ownership form:	Beneficial Ownership			
Reminder: R	eport on a sep	parate line for each c	class of securities ber	- Deriva	ative	· Securitie	es Ac	Pe thi cu	rsons w s form a rrently v	ho respond t ire not require alid OMB cou	ed to respo ntrol number ially Owned	nd unles			in SEC 1	1474 (9-02)	
Derivative Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code		5. Number		(Month/Day/Year)		ole and	7. Title and of Underlyin Securities (Instr. 3 and	g I	8. Price of Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownersh Form of Derivativ Security: Direct (I or Indire	(Instr. 4)	
				Code	V	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)		
Non- Qualified Stock Option (right to buy)	\$ 117.12	04/28/2015		A		17,590		04/28/	2016 <sup>(1)</sup>	04/28/2025	Class 1 Common Stock	17,590	\$ 0	17,590	D		
Restricted Stock	<u>(2)</u>	04/28/2015		A		2,590		05/01/	2016 <sup>(3)</sup>	(3)	Class A Common Stock	2,590	\$ 0	2,590	D		

Relationships

EVP, Corp Dev & Beer Ops

Other

Officer

10%

Owner

Director

### **Signatures**

HETTERICH F PAUL

VICTOR, NY 14564

/s/ H. Elaine Ziakas for F. Paul Hetterich	04/30/2015			
Signature of Reporting Person	Date			

## **Explanation of Responses:**

Reporting Owner Name / Address

C/O CONSTELLATION BRANDS, INC.

207 HIGH POINT DRIVE, BUILDING 100

\* 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.
- (2) Each restricted stock unit represents a contingent right to receive one share of Constellation Brands, Inc. Class A Common Stock.
- (3) These restricted stock units vest in four equal annual installments beginning on the date specified. Vested shares will be delivered to the reporting person as of each vesting date net of shares withheld to satisfy taxes.

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.