SEC	Form 4	1
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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP
• • • • • • • • • • • • • • • • • • • •			

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

	OMB APPRO	VAL
	OMB Number:	3235-0287
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I	hours per response:	0.5

			of Could of Could and the integration company has of 1040						
1. Name and Address of Reporting Person* Hanson Robert Lee		'erson [*]	2. Issuer Name and Ticker or Trading Symbol <u>CONSTELLATION BRANDS, INC.</u> [STZ]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) C/O CONSTELLATION BRANDS, INC. 207 HIGH POINT DRIVE, BUILDING 100		NDS, INC.	3. Date of Earliest Transaction (Month/Day/Year) 06/26/2019	X	Officer (give title below) EVP & Pres. Wine	Other (specify below) e and Spirits			
(Street) VICTOR NY 14564 (City) (State) (Zip)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Filin Form filed by One Rep Form filed by More tha Person	orting Person			

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1	. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	, Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	Form: Direct Indire (D) or Indirect Benef (I) (Instr. 4) Owne	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)			

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Non- Qualified Stock Option (right to buy)	\$185.02	06/26/2019		A		12,299		06/26/2020 ⁽¹⁾	06/26/2029	Class 1 (convertible) Common Stock	12,299	\$0	12,299	D		
Restricted Stock Units	(2)	06/26/2019		A		7,906		05/01/2020 ⁽³⁾	(3)	Class A Common Stock	7,906	\$0	7,906	D		

Explanation of Responses:

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.

Remarks:

/s/H. Elaine Ziakas for Robert

. Hanson

06/28/2019

Date

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* 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).

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

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 Number.