

BROWN FORMAN CORP
Form 4
August 01, 2016

FORM 4

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

OMB APPROVAL

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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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
Hinrichs Thomas

2. Issuer Name and Ticker or Trading Symbol
BROWN FORMAN CORP [BFA, BFB]

5. Relationship of Reporting Person(s) to Issuer
(Check all applicable)

(Last) (First) (Middle)
850 DIXIE HIGHWAY
(Street)

3. Date of Earliest Transaction (Month/Day/Year)
07/28/2016

____ Director _____ 10% Owner
 Officer (give title below) _____ Other (specify below)
SVP, Pres. Eur, N.Asia, ANZSEA

LOUISVILLE, KY 40210
(City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting 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)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
				(A) or (D) Code V Amount (D) Price			
Class A Common					27	D	
Class B Common					1,006	D	
Class A Common					2,3604 ⁽¹⁾	I	DRIP
Class B Common					0.521 ⁽¹⁾	I	DRIP

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

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(9-02)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Amount or Number of Shares	
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	
Stock Appreciation Right ⁽²⁾	\$ 98.01	07/28/2016		A	5,876	05/01/2019	04/30/2026	Class B Common	5,876
Stock Appreciation Right	\$ 35.51					05/01/2011	04/30/2018	Class B Common	3,030
Stock Appreciation Right	\$ 27.05					05/01/2012	04/30/2019	Class B Common	3,370
Stock Appreciation Right	\$ 38.43					05/01/2013	04/30/2020	Class B Common	2,550
Stock Appreciation Right	\$ 46.4					05/01/2014	04/30/2021	Class B Common	4,830
Stock Appreciation Right	\$ 58.7					05/01/2015	04/30/2022	Class B Common	5,670
Stock Appreciation Right	\$ 72.42					05/01/2016	04/30/2023	Class B Common	4,370
Stock Appreciation Right	\$ 91.97					05/01/2017	04/30/2024	Class B Common	3,450
Stock Appreciation	\$ 102.25					05/01/2018	04/30/2025	Class B Common	4,370

Right

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Hinrichs Thomas 850 DIXIE HIGHWAY LOUISVILLE, KY 40210			SVP, Pres. Eur, N.Asia, ANZSEA	

Signatures

Michael E. Carr, Jr., Attorney in Fact for Thomas Hinrichs	08/01/2016
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__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) Number of shares acquired through the issuer's dividend reinvestment plan as of July 27, 2016.
 - (2) No money was paid to or received by the reporting person for these SSARs.

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.