Edgar Filing: BROWN FORMAN CORP - Form 4

BROWN FOI	RMAN CORP										
Form 4											
August 01, 20									0.45.4		
FORM	4 UNITED S	глтбс	SECUE	ITIFS AT		'H A N	CF (OMMISSION	r	PPROVAL	
Check this box								OMB Number:	3235-0287		
if no longe	ər								Expires:	January 31 2005	
subject to STATEMENTO Section 16. Form 4 or			F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					burden hou	Estimated average burden hours per response 0.		
Form 5 obligation: may contin <i>See</i> Instruct 1(b).	s Section 17(a)	of the I	Public Uti		ing Com	pany A	Act of	e Act of 1934, f 1935 or Sectio 40	n		
(Print or Type Ro	esponses)										
1. Name and Address of Reporting Person <u>*</u> Steiner Lisa P			2. Issuer Name and Ticker or Trading Symbol BROWN FORMAN CORP [BFA, BFB]					5. Relationship of Reporting Person(s) to Issuer			
							А,	(Check all applicable)			
(Last) 850 DIXIE H	, , , , , , , , , , , , , , , , , , ,			3. Date of Earliest Transaction (Month/Day/Year) 07/28/2016				Director 10% Owner X Officer (give title Other (specify below) below)			
								SVP, Chief of Staff			
(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 Person			
LOUISVILL	E, KY 40210							Form filed by M Person	More than One Ro	eporting	
(City)	(State) (Z	Zip)	Table	e I - Non-De	erivative S	ecuriti	ies Acq	uired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any		3. Transactio Code (Instr. 8)	4. Securit nAcquired Disposed (Instr. 3,	(A) or of (D)	i)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Class A Common				Code V	Amount	(D)	Price	(Instr. 3 and 4) 7,646	D		
Class A Common								745.7272 <u>(1)</u>	I	DRIP	
Class B Common								111	D		
Class B Common								127.0618 <u>(1)</u>	I	DRIP	

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

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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. Transacti Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Shares
Stock Appreciation Right (2)	\$ 98.01	07/28/2016		А	7,507	05/01/2019	04/30/2026	Class B Common	7,50′
Stock Appreciation Right	\$ 72.42					05/01/2016	04/30/2023	Class B Common	6,73
Stock Appreciation Right	\$ 91.97					05/01/2017	04/30/2024	Class B Common	5,46′
Stock Appreciation Right	\$ 102.25					05/01/2018	04/30/2025	Class B Common	5,64

Reporting Owners

Reporting Owner Name / Address	Relationships						
reporting o when really read too	Director	10% Owner	Officer	Other			
Steiner Lisa P 850 DIXIE HIGHWAY LOUISVILLE, KY 40210			SVP, Chief of Staff				
Signatures							
Michael E. Carr, Jr., Attorney i Steiner	08/01/2016						
**Signature of Reporting	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.