

WOLF TIMOTHY V
Form 4
May 16, 2005

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 *
WOLF TIMOTHY V

2. Issuer Name and Ticker or Trading Symbol
MOLSON COORS BREWING CO
[TAP.A; TAP]

5. Relationship of Reporting Person(s) to Issuer
(Check all applicable)
 Director 10% Owner
 Officer (give title below) Other (specify below)
V.P., Chief Financial Officer

(Last) (First) (Middle)
C/O MOLSON COORS BREWING COMPANY, 311 10TH STREET, NH 355

3. Date of Earliest Transaction (Month/Day/Year)
05/12/2005

(Street)
GOLDEN, CO 80401

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

(City) (State) (Zip)

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 Indirect Ownership (Instr. 4)
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Class B
Common
Stock
(non-voting) -
NO
CHANGE

Class B
Common
Stock
(non-voting)

05/12/2005

A 10,000 A (3) 14,234 D

39.82 I 401 (k)
Plan (1)

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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 Acquired (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)	8. Price of Derivative Security (Instr. 3)			
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	(2)					(2)	(2)			Class B Common Stock	225,749

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
WOLF TIMOTHY V C/O MOLSON COORS BREWING COMPANY 311 10TH STREET, NH 355 GOLDEN, CO 80401			V.P., Chief Financial Officer	

Signatures

Annita M. Menogan as agent for Timothy V. Wolf

 **Signature of Reporting Person
 05/16/2005
 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).
- The amount of securities in the Reporting Persons 401(k) is derived by combining the value of contributions by Reporting Person to their 401(k) plus Company matches to the Reporting Persons 401(k) and dividing this account balance by the Issuer's stock price as of 12/31/03 - this equals the reported number of shares in the Reporting Persons 401(k) account.

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- (2) Reporting Person holds an aggregate of 225,749 stock options, which have various exercise prices, grant dates and expiration dates.
- (3) These shares were issued as a restricted stock unit under the Issuer's Incentive Compensation Plan and shall vest on the third anniversary following the date of grant, subject to acceleration or cancellation upon the occurrence of certain events.

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.