#### **BROWN FORMAN CORP**

Form 4

August 12, 2005

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB 3235-0

Number: 3235-0287

January 31,

**OMB APPROVAL** 

Expires: 2005
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if no longer subject to Section 16. Form 4 or Form 5

Check this box

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * WOOD PHOEBE A			2. Issuer Name <b>and</b> Ticker or Trading Symbol BROWN FORMAN CORP [BFA, BFB]						5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last) 850 DIXIE I	(First)	(Middle)	3. Date of (Month/D	3. Date of Earliest Transaction (Month/Day/Year) 08/11/2005					Director 10% Owner Other (specify below) below)  EVP, Chief Financial Officer		
(Street) 4. If Amendment, Date Origina Filed(Month/Day/Year)  LOUISVILLE, KY 40210					e Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table	e I - Non-l	De	erivative S	Securi	ties Ac	quired, Disposed	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Execu any	eemed tion Date, if h/Day/Year)	Code (Instr. 8)	)	4. SecurinAcquired Disposed (Instr. 3,	l (A) o l of (D	))	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 Beneficial Ownership (Instr. 4)
Class A Common (1)	08/11/2005			A		4,257	A	\$0	4,257	D	
Class B Common									3,797	D	
Class B Common									791	I	By 401(k) plan

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

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#### number.

## 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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		re e	7. Title and Amour Underlying Securit (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Non-Qualified Stock Option (right to buy)	\$ 50					05/01/2006	08/31/2007	Class B Common	480
Non-Qualified Stock Option (right to buy)	\$ 32.33					05/01/2004	04/30/2011	Class B Common	16,892
Non-Qualified Stockl Option (right to buy)	\$ 34.17					05/01/2004	04/30/2011	Class B Common	17,302
Non-Qualified Stock Option (right to buy)	\$ 32.11					05/01/2005	04/30/2012	Class B Common	22,012
Non-Qualified Stock Option (right to buy)	\$ 39.23					05/01/2006	04/30/2013	Class B Common	14,500
Non-Qualified Stock Option (right to buy)	\$ 46.58					05/01/2007	04/30/2014	Class B Common	14,085
Stock Appreciation Right	\$ 59.18					05/01/2008	04/30/2015	Class A Common	8,581

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
WOOD PHOEBE A 850 DIXIE HIGHWAY			EVP, Chief Financial Officer				

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LOUISVILLE, KY 40210

## **Signatures**

Nelea A. Absher, Attn. in Fact for: Phoebe A. Wood 08/11/2005

\*\*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) The reporting person was awarded these shares of restricted stock under the Brown-Forman Omnibus Compensation Plan, based on the Company's fiscal 2005 performance.

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.

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