Edgar Filing: WOOD PHOEBE A - Form 4

WOOD PHO	EBE A										
Form 4	2006										
December 26,										PPROVAL	
FORM	4 UNITED	STATES		ITIES AN hington, 1		3235-0287					
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may contin <i>See</i> Instruct 1(b).	Filed pur Section 17(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 20(b) of the Investment Company Act of 1940								January 31 2005 Estimated average burden hours per response 0.5	
(Print or Type Ro	esponses)										
1. Name and Address of Reporting Person <u>*</u> WOOD PHOEBE A			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			3. Date of Earliest Transaction (Month/Day/Year) 12/21/2006					Director 10% Owner X Officer (give title Other (specify below) below) below) EVP, Chief Financial Officer			
(Street) LOUISVILLE, KY 40210			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 Form filed by More than One Reporting			
								Person			
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Dee Execution any (Month/Day/Year)		on Date, if	4. Securities nAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)				
Class A				Code V	Amount	or (D)	Price	(Instr. 3 and 4) 7,484	D		
Common								.,			
Class B Common	12/21/2006			М	480	А	\$ 50	4,277	D		
Class B Common								1,441.8	Ι	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. Transactic Code (Instr. 8)	onof Deri Secu Acqu (A) o Disp of (I	vative urities uired or oosed D) r. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shar
Non-Qualified Stock Option (right to buy)	\$ 50	12/21/2006		М		480	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	16,89
Non-Qualified Stockl Option (right to buy)	\$ 34.17						05/01/2004	04/30/2011	Class B Common	17,30
Non-Qualified Stock Option (right to buy)	\$ 32.11						05/01/2005	04/30/2012	Class B Common	22,01
Non-Qualified Stock Option (right to buy)	\$ 39.23						05/01/2006	04/30/2013	Class B Common	14,50
Non-Qualified Stock Option (right to buy)	\$ 46.58						05/01/2007	04/30/2014	Class B Common	14,08
Stock Appreciation Right	\$ 59.18						05/01/2008	04/30/2015	Class B Common	8,58
Stock Appreciation Right	\$ 72.4						05/01/2009	04/30/2016	Class B Common	8,358

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			

WOOD PHOEBE A 850 DIXIE HIGHWAY LOUISVILLE, KY 40210

EVP, Chief Financial Officer

Signatures

Nelea A. Absher, Attn. in Fact for: Phoebe A. Wood

**Signature of Reporting Person

Date

12/26/2006

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).

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.