

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

OMB APPROVAL
OMB Number: 3235-0287
Expires: January 31, 2005
Estimated average burden
hours per response... 0.5

## 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(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2	2. Issuer Name <b>and</b> Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
WOLF TIMO	THY V	,		(	COC	ORS AD	OL	Ρŀ	H CC	) [ F	RK	<b>[Y</b> ]						
(Last)	(First)	(1)	Middle)	3. Date of Earliest Transaction (MM/DD/YYYY)							Y)	Direct	or	_	10% O	wner		
														X Office below)	er (give title	e below)	Othe	r (specify
C/O ADOLPH	I COOI	RS					12	/3:	1/200	<b>)</b> 4				V.P., Chi	ef Financ	ial Office	r	
COMPANY, 3	311 10T	H ST	REET,											ŕ				
NH 355																		
	(Street)					Amendme DD/YYYY)	nt, D	ate	Origi	inal l	File	ed		6. Individ Applicable L		nt/Group l	Filing (Che	eck
GOLDEN, CO	80401																	
(City) (State) (Zip)					1/4/2005									X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - Non-	Deri	vativ	e Securit	ies A	cq	uired	, Dis	po	sed of,	or B	eneficially		•		
			2. Tra	ans.	2A. Deemed Execution Date, if any	3. Trans Code (Instr 8)		4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)			of (D) Followin (Instr. 3		ing Reported Transaction(s)  3 and 4)  Ownership Form: Direct (D) or Indirect			Beneficial Ownership		
							Code	V	Amour	(A) or nt (D)		Price					(I) (Instr. 4)	
Class B Common Stoo	ck (non-voti	ng) NO	CHANGE											3	9.82		I	401 (k) Plan <sup>(1)</sup>
Class B Common Stock (non-voting) (3)				12/31	1/2004 12/31/2004 A (3) 5896 A \$75.855 8297					D								
Tab	le II - De	rivativ	e Securit	ies B	enef	icially Ow	ned	( e	.g. , p	uts,	cal	lls, war	rant	s, options	, convert	ible secur	ities)	
. Title of Derivate 2. 3. 3A. 4.		4. Trans Code	S. 5. De S) Se Ac	Number of erivative securities equired (A) or asposed of (D) astr. 3, 4 and 5	6. an	6. Date Exer and Expirati			rcisable		and A	nount of lerlying curity	Derivative Security	,	10. Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	V	(A) (D)		ite terci		Expira Oate	tion	Title	N	mount or umber of nares		Reported Transaction (s) (Instr. 4)	(I) (Instr.	
Employee Stock Option (right to buy)	(2)							(	2)	(2)		Class I Commo Stock	on	(2)		204895	D	

## **Explanation of Responses:**

- (1) 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.
- (2) Reporting person holds a total of 204,895 options with various exercise date and various expiration dates
- (3) PLEASE NOTE THAT THE ONLY CHANGES REFLECTED IN THIS AMENDMENT TO FORM 4 IS TO CORRECT THE TRANSACTION CODE. THE PREVIOUSLY FILED FORM 4 INDICATING A TRANSACTION CODE OF "I" FOR THIS TRANSACTION WAS INCORRECTLY STATED AND SHOULD HAVE REFLECTED TRANSACTION CODE "A" FOR STOCK GRANTS AWARDED PURSUANT TO RULE 16b-3(d).

**Reporting Owners** 

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

## **Signatures**

Annita Menogan as agent for Timothy V. Wolf

\*\* Signature of Reporting Person

Date

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

- \* 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.