

] 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

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2011

Estimated average burden

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP hours per response... 0.5 **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

| | | | | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|--|---|--------|-------------------------------|------------------------------------|---|---|--|-----|-----------------------|---|-----|---|---|---|--|----------------------------------|------------------------------------|
| WALKER SAMUEL D | | | | | MOLSON COORS BREWING CO [TAP] | | | | | | | | Direct | or | _ | 10% O | wner |
| (Last) | (Last) (First) (Middle) 25 17TH STREET, SUITE 3200 | | | | 3. Date of Earliest Transaction (MM/DD/YYYY) 1/12/2012 | | | | | | | | X Officer (give title below) Other (specify below) Global CLO & Mng Dir MC LLC | | | | |
| (Street) | | | | 4 | 4. If Amendment, Date Original Filed (MM/DD/YYYY) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| DENVER, C | DENVER, CO 80202 (City) (State) (Zip) | | | | | | | | | | | | _ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tab | ole I - Noi | 1-Deri | ivativ | e Securi | ities Ac | qı | uired, Dis | spos | sed | l of, or l | Beneficially | y Owned | | | |
| | | | 2. Tr Date | • | Execution Date, if | 3. Trans. Code Acquired Disposed (Instr. 8) | | | (A) or Follow (Instr. | | | ount of Securities Beneficially Owned ving Reported Transaction(s) 3 and 4) | | | Ownership Form: Direct (D) | Beneficial Ownership | |
| | | | | | | any | Code | v | Amount | (A) or (D) | Pri | ice | | | | or Indirect (I) (Instr. 4) | (Instr. 4) |
| Class B Common Stock 1/1 | | | | 1/12 | 2/2012 | | s | | 3600.0000 | D | \$4 | 15 | 50982.0000 | | | D | |
| Tal | ole II - De | rivati | ive Secur | ities B | Senefi | cially O | wned (| e., | g. , puts, | call | ls, | warran | ts, options | , convert | ible secur | ities) | |
| 1. Title of Derivate Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | e Date | Deemed Execution Date, if any | 4. Trans. Code (Instr. 8) | Deriv Secur Acqu Dispo | | 6. Date Exercisable and Expiration Date Date Expiration | | | 7. Title and Amou Securities Underly Derivative Securi (Instr. 3 and 4) | | ties Underl tive Securi 3 and 4) | ying ty | 8. Price of Derivative Security (Instr. 5) | derivative Securities Beneficially Owned Following Reported | Form of | Beneficial Ownership (Instr. 4) D) |
| | | | | Code V | (A) | (D) | Exercisable | | | Title Shares | | | Number of | (s) (Inst | | l) | |

Explanation of Responses:

Remarks:

The transaction reported in this Form 4 was effected pursuant to a Rule 10b5-1 tradind plan previously adopted by the reporting person.

Reporting Owners

| Reporting 6 where | | | | | | | | | | |
|----------------------------------|---------------|-----------------------------|-----------------------------|-------|--|--|--|--|--|--|
| Banastina Oversas Nama / Adduses | Relationships | | | | | | | | | |
| Reporting Owner Name / Address | Director | 10% Owner | rOfficer | Other | | | | | | |
| WALKER SAMUEL D | | | | | | | | | | |
| 1225 17TH STREET | | | Global CLO & Mng Dir MC LLC | | | | | | | |
| SUITE 3200 | | Global CLO & Willig Dil Wic | | | | | | | | |
| DENVER, CO 80202 | | | | | | | | | | |

Signatures

/s/ Samuel D. Walker

1/13/2012

Date

** Signature of Reporting Person

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.