

MOLSON COORS BREWING CO
 Form 3/A
 September 23, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF 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 * WALKER SAMUEL D (Last) (First) (Middle) C/O MOLSON COORS BREWING COMPANY, 311 10TH STREET, NH314 (Street) GOLDEN, CO 80401 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 05/12/2005	3. Issuer Name and Ticker or Trading Symbol MOLSON COORS BREWING CO [TAP.A; TAP]	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) Chief Legal Counsel	5. If Amendment, Date Original Filed(Month/Day/Year) 06/20/2005	6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person
---	--	---	---	--	---

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Class B Common Stock (non-voting)	1,410 ⁽¹⁾	D	^

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

SEC 1473 (7-02)

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.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	--	---	---	--

Edgar Filing: MOLSON COORS BREWING CO - Form 3/A

Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)
---------------------	--------------------	-------	----------------------------------	----------	--

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
WALKER SAMUEL D C/O MOLSON COORS BREWING COMPANY 311 10TH STREET, NH314 GOLDEN, CO 80401	Â	Â	Â Chief Legal Counsel	Â

Signatures

Annita M. Menogan as agent for Samuel D.
Walker 09/23/2005

**Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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 FILED AN AMENDED FORM 3 ON 6/20/05 TO CORRECT THE NUMBER OF SHARES OWNED AND SHOWED THE CORRECTED AMOUNT AS 2,106 SHARES OF CLASS B COMMON STOCK. THESE SHARES WERE ACQUIRED BY MEANS OF TWO SEPARATE RESTRICTED STOCK AWARDS OF 1,000 AND 1,106 SHARES EACH FOR A TOTAL OF 2,106 SHARES. THIS ADDITIONAL AMENDMENT REFLECTS THE FACT THAT 352 SHARES AND 344 SHARES, RESPECTIVELY, HAD BEEN WITHHELD IN LIEU OF CASH PAYMENT FOR APPLICABLE TAXES RELATED TO THOSE AWARDS, FOR A NET TOTAL ISSUANCE OF 1,410 SHARES.

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.