## FORM 4

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

| OMB APPF           | ROVAL     |
|--------------------|-----------|
| OMB Number:        | 3235-0287 |
| Estimated average  | burden    |
| hours per response | e 0.5     |

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

|  | pe Responses | •                                       |  |   |       |  |   |                 |                |               |  |                                 | ,   |  |   |                            |   |   |   |  |  |  |  |
|--|--------------|---|--|---|-------|--|---|-----------------|----------------|---------------|--|---------------------------------|---|--|---|----------------------------|---|---|---|--|--|--|--|
|  |              | Reporting Person                        | on <del>*</del>  | 2. Issuer N<br>BRUNSW                                       |       |  |   |                 | ading          | Sym           | nbol   |                                 |   | Director   | Ì   | ting Person<br>k all appli |   |   |   |  |  |  |  |
| (Last) (First) (Middle) BRUNSWICK CORPORATION, 1 N FIELD COURT |              |   |  | 3. Date of Earliest Transaction (Month/Day/Year) 07/21/2005 |       |  |   |                 |                |               |  |                                 |   | X Officer (give title below) Other (specify below)  VP & CHIEF HUMAN RES OFFICER |   |                            |   |   |   |  |  |  |  |
| I AME DO   | DEGE H       | (Street)                                |  | 4. If Amend   | lmen  | ıt, D  | ate Orig                                    | ginal Fi        | led(M          | Month/I       | 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 |  |   |                            |   |   |   |  |  |  |  |
| LAKE FO  | OREST, IL    | (State)                                 | (Zip)  |   |       | т.   | .LI. T                                      | N D             |                | 4             | C!4! -   |                                 |   |  |   |                            |   |   |   |  |  |  |  |
| 1.Title of Se  |              |   | 2. Transaction   | 2A. Deemed  | 1     |  | 3. Trans                                    |                 |                |               | ities Acqu                                       |                                 |   |  | Securities  | ienciany (                 | 6.  | 7 N:  | ature of  |  |  |  |  |
| (Instr. 3)   |              |   | Date<br>(Month/Day/Year)                               | Execution D   | Oate, | if   |   |                 | (A)            | or D          | isposed of 4 and 5)                              | of (D)                          | Bene<br>Repo  | ficially O   | wned Follo<br>saction(s)                            | wing                       | Owners<br>Form:<br>Direct (               | ship Indir<br>Bene  | ect<br>eficial<br>ership                                |  |  |  |  |
|  |              |   |  |   |       |  | Code  | v               | Am             | ount          | (A) or (D)                                       | Price                           |   |  |   |                            | (I)<br>(Instr. 4                          | Ì   | 1. 4)   |  |  |  |  |
| Common   | Stock        |   | 07/21/2005   |   |       |  | M   |                 | 1,7            | 50            | <del>                                     </del> | S<br>21.83                      | 41,6  | 06   |   |                            | D   |   |   |  |  |  |  |
| Common   | Stock        |   | 07/21/2005   |   |       |  | S   |                 | 1,7            | 50            | D \( \frac{\frac{1}{2}}{2}                       | §<br>47.50                      | 39,8  | 56   |   |                            | D   |   |   |  |  |  |  |
| Common   | Stock        |   |  |   |       |  |   |                 |                |               |  |                                 | 5,31  | 2  |   |                            | I   | By<br>Res<br>Plar   | toration  |  |  |  |  |
| Common   | Stock        |   |  |   |       |  |   |                 |                |               |  |                                 | 94  |  |   |                            | I   | By S<br>Plar<br>Trus  |   |  |  |  |  |
|  |              |   | Table II -   | Derivative S  |       |  |   | forr            | n dis<br>Dispo | splay         | ys a cur<br>of, or Ber                           | rently<br>reficial              | valic   | I OMB c  | d to respo<br>control nur                           |                            | s the                                     |   |   |  |  |  |  |
| Derivative<br>Security<br>(Instr. 3)                           | Conversion   | 3. Transaction<br>Date<br>(Month/Day/Ye | 3A. Deemed<br>Execution Date,<br>any<br>(Month/Day/Ye: | Code  | ion ( | 5. Nof<br>Deri<br>Secu<br>Acq<br>(A)<br>Disp | ivative urities uired or bosed D) tr. 3, 4, | -               | Exe            | rcisa<br>Date | ble and  | 7. Tit<br>Amor<br>Unde<br>Secur | tle and<br>unt of<br>erlying  | ;<br>;   | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) |                            | re C<br>S F<br>dlly D<br>S D<br>oon(s) (I | wnership<br>orm of<br>erivative<br>ecurity:<br>virect (D)<br>r Indirect | 11. Natu<br>of Indire<br>Benefic<br>Owners<br>(Instr. 4 |  |  |  |  |
|  |              |   |  | Code  | V     | (A)  | (D)   | Date<br>Exercis | sable          |               | piration<br>e                                    | Title                           |   | Amount<br>or<br>Number<br>of<br>Shares   |   |                            |   |   |   |  |  |  |  |
| Non-<br>Qualified<br>Stock<br>Option<br>(right to<br>buy) (11) | \$ 21.83     | 07/21/2005                              |  | М   |       |  | 1,750                                       | <u>(2</u>       | <u>2)</u>      | 04/           | 30/2013  | 4                               | ımon<br>ock   | 1,750  | \$ 0  | 3,500                      | 0   | D   |   |  |  |  |  |
| Repor  | ting O       | wners                                   |  |   |       |  |   |                 |                |               |  |                                 |   |  |   |                            |   |   |   |  |  |  |  |

| D  |          |           | Relationships                |       |
|--|----------|-----------|------------------------------|-------|
| Reporting Owner Name / Address   | Director | 10% Owner | Officer                      | Other |
| LOCKRIDGE BILLY RUSSELL<br>BRUNSWICK CORPORATION<br>1 N FIELD COURT<br>LAKE FOREST, IL 60045 |          |           | VP & CHIEF HUMAN RES OFFICER |       |

### **Signatures**

| By: Power of Attorney For: /s/ B Russell Lockridge | 07/22/2005 |
|--|------------|
| **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) Employee Stock Option granted under the 1991 Stock Plan with right to have shares withheld or to deliver previously acquired shares to pay income taxes on exercise of option.
- (2) One-fourth of the total shares granted may be exercised on each of the first, second, third, and fourth anniversaries following grant date.

#### Remarks:

This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.

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.