### Edgar Filing: BOSTON BEER CO INC - Form 4

	EER CO INC												
Form 4 November 1	2, 2013												
FORM	ЛЛ										PPROVAL		
	UNITED	STATES							OMMISSION	OMB Number:	3235-0287		
Washington, D.C. 20549Check this box if no longer subject to Section 16.STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESForm 4 or Form 5 obligations 							Expires: January 31, 2005 Estimated average burden hours per response 0.5						
(Print or Type	Responses)												
1. Name and A KOCH C JA	Address of Reporting AMES	Person <u>*</u>	Symbol			d Ticker of		-	5. Relationship of Issuer				
						ransaction	-	1	(Check all applicable)				
				(Month/Day/Year) 11/08/2013					X DirectorX 10% Owner X Officer (give title Other (specify below) below) Chairman				
POSTON	(Street)		4. If Ame Filed(Mo			ate Origina r)	al		6. Individual or Jo Applicable Line) _X_ Form filed by 0 Form filed by M	One Reporting P	erson		
BOSTON,		(7:)							Person				
(City)	(State)	(Zip)	Tab	le I - No	on-l	Derivative	Secu	rities Acq	uired, Disposed of	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		Code (Instr. 3	8)	4. Securi on(A) or Di (Instr. 3, Amount	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Class A Common	11/08/2013			S		600	D	240.67 (1)	28,264	D			
Class A Common	11/08/2013			S		400	D	\$ 241.39 (2)	27,864	D			
Class A Common									23,486	I	Custodian for children under UGTMA		

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Class A Common	3,656	Ι	By spouse as custodian for children under UGTMA
Class A Common	2,532	Ι	By spouse in trust for children
Class A Common	44,248	Ι	By LLC managed by spouse

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

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 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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Under Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	Director 10% Owner Officer					
KOCH C JAMES C/O THE BOSTON BEER COMPANY ONE DESIGN CENTER PLACE, SUITE 850 BOSTON, MA 02210	Х	Х	Chairman				

## Signatures

Kathleen H. Wade under POA for the benefit of C. James Koch

11/12/2013

\*\*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).
- The price shown is the weighted average sale price for the transactions reported on this line. The range of sale prices for the 600 shares is(1) from \$240.25 to \$241.00. The Filing Person will provide full information regarding the number of shares sold at each separate price upon request of the SEC, the Registrant, or a shareholder of the Registrant.

The price shown is the weighted average sale price for the transactions reported on this line. The range of sale prices for the 400 shares is

(2) from \$241.25 to \$242.00. The Filing Person will provide full information regarding the number of shares sold at each separate price upon request of the SEC, the Registrant, or a shareholder of the Registrant.

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.