Edgar Filing: BOSTON BEER CO INC - Form 4

BOSTON B	EER CO INC										
Form 4											
January 03, 2	2014										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AF	OMB APPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer									Expires:	January 31, 2005	
subject to Section 16. Form 4 or				GES IN BENEFICIAL OWNERSHIP OF SECURITIES				ERSHIP OF	Estimated average burden hours per		
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 4 or 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									0.5		
(Print or Type I	Responses)										
Grinnell David L. Symbol				r Name and Ticker or Trading ON BEER CO INC [SAM]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (1			Earliest Tr		L	-	(Check	all applicable)	
C/O THE B COMPANY	OSTON BEER (, INC., ONE DE LACE, SUITE 85	SIGN	(Month/D 01/02/20	ay/Year)	ansaction			Director X Officer (give below) Vice Pres		Owner r (specify ing	
(Street) 4. If Ame			ndment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mon BOSTON, MA 02210				nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	a L. Mara D		C			an Dan affaiall	O d	
							-	iired, Disposed of,		-	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution 1 any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	sposed	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	01/02/2014			S <u>(1)</u>	325	D	\$ 225.95 (2)	4,092 <u>(3)</u>	D		

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	· · ·		Date	7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
Repo	rting O	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Grinnell David L. C/O THE BOSTON BEER COMPANY, INC. ONE DESIGN CENTER PLACE, SUITE 850 BOSTON, MA 02210			Vice President of Brewing				
Signatures							
Kathlen H. Wade under POA for the benefit of I Grinnell	David	(01/03/2014				
**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) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on November 13, 2013.
 - The price shown is the weighted average sale price for the transactions reported on this line, as the transactions were part of a bulk sale.
- (2) 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.
- (3) The shares reported include 582 shares of restricted stock subject to vesting conditions.

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.