FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

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

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

1. Name and Address of Reporting Person*  KOCH C JAMES					2. Issuer Name <b>and</b> Ticker or Trading Symbol BOSTON BEER CO INC [ SAM ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director X 10% Owner						
(Last) (First) (Middle) C/O THE BOSTON BEER COMPANY ONE DESIGN CENTER PLACE, SUITE 850					3. Date of Earliest Transaction (Month/Day/Year) 04/20/2020									2	X Officer (give title Other (specify below)  Chairman					
(Street) BOSTO	N MA	02210			4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	Individual or Joint/Group Filir Line)     X Form filed by One Rep Form filed by More that Person				porting Person	
(City) (State) (Zip)  Table I - Non-Derivat				<u> </u>	o Coour	witi o o	A 0.001			Dianas			Ilsa Osaara	a.d				4		
1. Title of Security (Instr. 3)			2. Transaction Date	2. Transaction		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquinisposed Of (D) (I			ed (A) or		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Cod	Code V		Amount	(1	A) or Price			Transaction(s) (Instr. 3 and 4)						
Class A C			04/20/2020	0			S <sup>(1</sup>	1)		300		D	\$420.	49 <sup>(2)</sup>	208,4		I		By LLC	$\dashv$
Class A C	LOMMON														44,2	248			managed by spouse	
Class A C	Common														23,4	186	1	I	Custodian for children under UGTMA	
Class A C	Common														65,2	245	]	I	By Foundatio managed by Reporting Person	
Class A C	Common														5,0	00	1		By Trust a Trustee	ıs
Class A Common															3,6	3,656		I	By spouse as custodian for children under UGTMA	
Class A Common															2,532		I ir		By spouse in trust for children	
		Tal	ole II - Derivati (e.g., pu												y Owne	d				
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		Execution Date, if any		ansaction de (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exp	iratio	xercisable n Date ay/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (D or Indire (I) (Instr.	Benefic Owners ct (Instr. 4	ect cial ship
			Co	de V		(A) (D) Exe				ration		Amou or Numb of Share	per							

## Explanation of Responses:

- 1. The transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on March 4, 2020.
- 2. The price shown is the weighted average sale price for the transactions reported on this line. The range of sale prices for the 200 shares is from \$420.19 to \$420.70. 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 343 shares of restricted stock subject to vesting conditions.

## Remarks:

Michael G. Andrews under 04/21/2020 POA for the benefit of Koch C. James

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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 Number.