FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person* ROPER MARTIN F						2. Issuer Name and Ticker or Trading Symbol BOSTON BEER CO INC [SAM]							(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last)	`	rst) (Middl	,		3. Date of Earliest Transaction (Month/Day/Year) 10/03/2016							2	Officer below)	(give title	and C	Other (s below)			
ONE DE	4. If /	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable										
(Street)	N M	MA 02210													x Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St		Zip)																	
			le I -							d, Di	isposed of			_						
Date				2. Transaction Date (Month/Day/	Year) if			3. Transaction Code (Instr. 8)		4. Securities Disposed Of		Benefici Owned	es Form ially (D) o		n: Direct of Brect (I)	. Nature If Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	d tion(s)		r. 4)	(Instr. 4)		
Class A (10/03/20	16				M ⁽¹⁾		2,157	A	\$43.55	34,	430	D							
Class A Common 10/03/201					16				S ⁽¹⁾		1,400	D	\$153.76	2) 33,	33,030		D			
Class A Common 10/03/201				16	16			S ⁽¹⁾		757	D	\$154.9	32,	2,273		D				
			Ta								posed of, o convertible			wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if an	Deemed cution Date,	4. Transac Code (II 8)	5. action Number		Expirati (Month/	on Da	(ear)	7. Title Amoun Securiti Underly Derivati Security and 4)	t of les ying live ly (Instr. 3	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	of Shares							
Class A Common Stock Option	\$43.55	10/03/2016			M ⁽¹⁾			2,157	08/13/20	13 ⁽¹⁾	08/11/2017 ⁽¹⁾	Class A Common	180,000	\$0	0		D			

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 July 29, 2016. The Rule 10b5-1 trading plan and the transactions contemplated thereby were approved by unanimous consent of the Class B Stockholders of the Company.
- 2. The price shown is the weighted average sale price for the transactions reported on this line. The range of sale prices for the 1,400 shares is from \$153.32 to \$154.21. 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 price shown is the weighted average sale price for the transactions reported on this line. The range of sale prices for the 757 shares is from \$154.46 to \$155.31. 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.

Michael G. Andrews under POA for the benefit of Martin 10/04/2016 F. Roper

** Signature of Reporting Person

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

- * 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.