Edgar Filing: BOSTON BEER CO INC - Form 4

BOSTON BE Form 4	ER CO INC										
February 24,	2016										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									9PROVAL 3235-0287		
Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru- 1(b).	er STATE 5. Filed pu ^s Section 17	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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							Expires: January 31, 2005 Estimated average burden hours per response 0.5		
(Print or Type R	esponses)										
Troupe Quincy B Sym			Symbol	Name and			-	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)			N BEER		[SAI	/ 1]	(Chec	ck all applicable	e)	
(Month/				Date of Earliest Transaction Ionth/Day/Year) 2/23/2016				Director 10% Owner X_ Officer (give title Other (specify below) Senior VP, Supply Chain			
				ndment, Date Original th/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
BOSTON, M	IA 02210							Form filed by M Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Aco	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)		ransaction Date 2A. Deemed onth/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price) 5)	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	02/23/2016			A <u>(1)</u>	3,900 (1)	А	\$0	3,900 <u>(1)</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)

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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)	5. Number of iorDerivative Expiration Date Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount (Underlying Securitie: (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Shar
Class A Common Stock Option	\$ 192.26	02/23/2016		А	22,418	02/23/2019 <u>(2)</u>	02/22/2026	Class A Common Stock	22,41
Reporting Owners									

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Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Troupe Quincy B C/O THE BOSTON BEER COMPANY 1 DESIGN CENTER PLACE, SUITE 850 BOSTON, MA 02210			Senior VP, Supply Chain			
Signatures						
Kathleen Wade under POA for the benefit or Troupe	f Quincy	В.	02/24/2016			
**Signature of Deporting Dercon			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 shares reported comprise of 3,900 shares of restricted stock subject to vesting conditions, all of which were granted as a restricted stock award on the transaction date pursuant to the Issuer's Employee Equity Incentive Program. The shares will vest in three equal

- (1) installments, on February 23 in the years 2017 through 2019, provided that the Reporting Person remains employed by the Issuer on the applicable vesting dates.
- The option will vest in five equal installments, on February 23 in the years 2019 through 2023, provided that the Reporting Person (2) remains employed by the Issuer on the applicable vesting date.

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.