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Form 4 December 12											
FORM	ПЛ									PPROVAL	
	UNITED S	STATES S		ATTIES AT			NGE C	OMMISSION	OMB Number:	3235-0287	
Check th				8,					Expires:	January 31,	
if no lon; subject to Section 1 Form 4 c Form 5 obligatio	o STATEM 16. or Filed purs	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								Expires: 2005 Estimated average burden hours per response 0.5	
may con See Instr 1(b).	tinue. Section 17(a			ility Hold	•	· ·		1935 or Section 0	n		
(Print or Type]	Responses)										
KOCH C JAMES Symbo				Name and				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M					. [071	1,1]	(Check all applicable)			
(Month/				Date of Earliest Transaction Aonth/Day/Year) 2/09/2005				X DirectorX 10% Owner X Officer (give title Other (specify below) below) Chairman			
				endment, Date Original onth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City)	(State) (Zip)	Tabl	e I - Non-D	erivative	Secur	ities Aca	uired, Disposed of	. or Beneficial	lv Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or	7. Nature of	
Class A Common	12/09/2005			S	100	D	\$ 25.89	71,186	Ι	Note 1 (1)	
Class A Common	12/09/2005			S	100	D	\$ 25.8	71,086	Ι	Note 1 (1)	
Class A Common	12/09/2005			S	100	D	\$ 25.85	70,986	I	Note 1 (1)	
Class A Common	12/09/2005			S	100	D	\$ 25.76	70,886	Ι	Note 1 (1)	
Class A Common	12/09/2005			S	150	D	\$ 25.7	70,736	Ι	Note 1 (1)	

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Class A	12/09/2005	S	100	Л	\$ 70,636	т	Note $1^{(1)}$
Common	12/09/2003	3	100	D	25.42	1	Note 1 <u>(-)</u>

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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. ionNumber of Derivative	6. Date Exerce Expiration Da (Month/Day/	Date	7. Title Amou Under Securi	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene
	Derivative				Securities	1		(Instr.	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable Date	*	Title	Number		
								of			
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships								
FB	Director 10% Owner		Officer	Other					
KOCH C JAMES C/O THE BOSTON BEER COMPANY 75 ARLINGTON STREET BOSTON, MA, X1 02116	Х	Х	Chairman						
Signatures									
Kathleen H. Wade under POA for the ber Koch	12/12/2005								

**Signature of Reporting Person

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) Reflects 32,456 shares held by Reporting Person's children and shares held by a limited liability company in which the children of the Reporting Person have a pecuniary interest, but to which the Reporting Person disclaims any beneficial ownership.

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.

Date