## Edgar Filing: KOCH C JAMES - Form 4

KOCH C JAM	IES										
Form 4											
June 10, 2005	_										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							r	OMB APPROVAL			
	UNITE	DSIAIL		shington,			NGE		OMB Number:	3235-0287	
Check this					2.0.20				Expires:	January 31,	
if no longer subject to STATEMENT OF CH				HANGES IN BENEFICIAL OW				NERSHIP OF		2005	
Section 16.				SECUR	SECURITIES				Estimated average burden hours per		
Form 4 or								response 0.5			
Form 5 obligations	-						-	ge Act of 1934,			
may contin	ue.			vestment	•	- ·		f 1935 or Sectio	n		
See Instruct 1(b).	tion	50(11)	or the m	vestment	compan	y 1100	. 01 17	10			
(Print or Type Res	sponses)										
1 Name and Add	tress of Reportir	ng Person *	<b>2</b> I	N		т 1'		5 Relationship of	Peporting Per	son(s) to	
KOCH C LANES				2. Issuer Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
KOCH C JAMES     Symbol       BOSTON BEER CO INC [SAM					M]						
(Last)	(First)	(Middle)		Earliest Tra		•	1	(Chec	ck all applicable	e)	
				Month/Day/Year)				XDirectorX10% Owner			
C/O THE BOSTON BEER			06/09/2005					X_ Officer (give title Other (specify below) below)			
COMPANY, 75 ARLINGTON								Chairman			
STREET											
				. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mon	(th/Day/Year)	1			Applicable Line) _X_ Form filed by One Reporting Person			
BOSTON, MA	A, X1 02116							Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ties Acc	quired, Disposed of	f, or Beneficial	lly Owned	
	2. Transaction D			3. Taran dia			-	5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Yea	ar) Execution any	on Date, if	Transaction(A) or Disposed of Code (D)					Form: Direct (D) or	Indirect Beneficial	
. ,		(Month/	(Instr. 8) (Instr. 3, 4 and 5)					Indirect (I) (Instr. 4)	Ownership		
								Following Reported	(Instr. 4)		
						(A) or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Class A Common	06/09/2005			S	5,000	D	\$ 21.5	105,291	Ι	Note 1 (1)	

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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	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	06/10/2005						
<u>**</u> 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) 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.