SEC Form 4	
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Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

- 1		
	OMB Number:	3235-0287
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSH	TATEMENT
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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 Ac O'Boyle C	ddress of Reporting arolyn L.	Person [*]		suer Name and Tick STON BEER				5. Relationship of Reporting Person(s) to Is: Check all applicable) Director 10% Ow				
(Last) ONE DESIG	(First) (Middle) DESIGN CENTER PLACE, SUITE			ate of Earliest Trans	action (Month	/Day/Year)	X	Officer (give title below) Chief Peo	Other below ple Officer	(specify)		
C/O THE BOSTON BEER COMPANY				Amendment, Date o	of Original File	d (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Appl Line)					
(Street) BOSTON	МА	02210				X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Ru	le 10b5-1(c)	Transac	tion Indication	*					
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1. Title of Secu	rity (Instr. 3)	2. Transa	ction	2A. Deemed	3.	4. Securities Acquired (A)	or	5. Amount of	6. Ownership	7. Nature		

	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Code (Instr.		Disposed Of (D) (Instr. 3, 4 and 5)					of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150. 4)
Class A Common	03/17/2023		A ⁽¹⁾		78	Α	\$226.66	3,038 ⁽²⁾	D	

 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 Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The shares were purchased pursuant to the Issuer's Employee Equity Incentive Plan on March 17, 2023, with an effective grant date of March 1,2023. Under this plan, tenured employees may purchase restricted shares at a discounted price. These restricted shares vest in five equal installments over a five year period, provided that the Reporting Person remains employed by the Issuer as of the applicable vesting date. The first installment vestsone year from the grant date and the final installment vests five years from the grant date. These shares have no expiration date.

2. The shares reported include 2,175 shares of restricted stock subject to vesting conditions.

Remarks:

 Michael G. Andrews under

 POA for the benefit of
 0

 Carolyn L.O'Boyle
 0

03/21/2023

** Signature of Reporting Person Date

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.