FORM 4

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| Check this box if no longer subject to Section 16. Form 4 or Form 5 | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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 Address of Reporting Person* <u>DUNBAR JENNIFER HOLDEN</u> | | | | | | | | | | | | | | | | | olicable) | , | Person(s) to Issuer 10% Owner | |
|---|---|-------------|---|---|---|---|-------------------|--------|------------------------------------|--------|---|---------------|---------------|----------------------|---|-----------------------|--|---|--|--|
| (Last) (First) (Middle) C/O BIG 5 SPORTING GOODS CORPORATION 2525 EAST EL SEGUNDO BLVD. | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/14/2018 | | | | | | | | | | | Office below | er (give title w) | Oth belo | er (specify w) | | |
| (Street) | JNDO CA | A 9 | 90245 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | . Indiv ine) X | ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tabl | e I - Nor | -Deriv | ative | Se | curitie | s Acc | quired, | Dis | posed o | f, or | Bene | eficia | ally (| Owne | ed | | | |
| | | | 2. Transaction Date (Month/Day/Year) | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code | Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | 4 and Secur Benef | | cially I Following | 6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4) | of Indirect | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | ico Tra | | action(s) 3 and 4) | | (11150.1.4) | |
| Common | Stock, par | value \$.01 | | 12/14 | 1/2018 | 3 | 12/17 | //2018 | A | | 527(1) |) | A | \$ | 0 41,675 D | | | | | |
| Common Stock, par value \$.01 | | | | | | | | | | | | | | | 16 | | 5,143 ⁽²⁾ | I | By the Lilac II Trust dated June 28, 2000 | |
| | | Та | ble II - D | | | | | | | | sed of, onvertib | | | | y Ov | vned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | 5. Number of | | 6. Date E Expiratio (Month/D | n Date | е | ble and 7. Ti | | str. 3 | | | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | |
| | | | Code V | | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amo or Nun of Sha | ber | | | | | | | | |

Explanation of Responses:

1. Represents shares as to which the reporting person acquired beneficial ownership as a result of automatic reinvestment of dividend accruals in respect of previously reported restricted stock units held by the reporting person pursuant to the issuer's Amended and Restated 2007 Equity and Performance Incentive Plan. These restricted stock units will vest on the same dates as the units in respect of which the dividends accrued. These accruals and reinvestments occur quarterly following grant of the units, with the accrual date being the deemed execution date reported herein.

2. These shares are owned indirectly by the reporting person as Trustee of the Lilac II Trust.

Remarks:

IAN R. LANDGREEN, ATTORNEY-IN-FACT

12/18/2018

** 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.