FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APP | ROVAL |
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| P | OMB Number: | 3235-028 |

| OWID INGITIBET. | 3233-0201 |
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| Estimated average burd | en |
| hours per response: | 0.5 |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Clark Boyd O | | | | | | 2. Issuer Name and Ticker or Trading Symbol BIG 5 SPORTING GOODS CORP [BGFV] | | | | | | | | | Check all a | hip of Reportii pplicable) ector icer (give title | ng Pers | 10% C | wner | |
|---|--|--------------------|-------|--|---------|---|------------------|---|--------------------|-----------------------------------|--|----------------------|-----------|----------------------|--|--|---|---|---|--|
| (Last) (First) (Middle) C/O BIG 5 SPORTING GOODS CORPORATION 2525 EAST EL SEGUNDO BLVD | | | | | ΓΙΟΝ | 3. Date of Earliest Transaction (Month/Day/Year) 03/14/2013 | | | | | | | | | | | Senior VP, I | | Other (specify below) Buying | |
| (Street) EL SEGUNDO CA 90245 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | | Table | e I - Noi | n-Deriv | ative | Se | curitie | es Ac | quired | , Dis | posed o | f, or | Ben | efici | ally Ow | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | Execution Date, | | Transaction Disposed Of Code (Instr. 5) | | | ties Acquired (A) I Of (D) (Instr. 3, 4 | | | nd Sec Ben Owi | mount of urities eficially led Following orted | Form (D) or | vnership :: Direct r Indirect :str. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | | Code | v | Amount | (1 | A) or D) | Price | Trai | saction(s) r. 3 and 4) | | | (Instr. 4) |
| Common | Stock, p | ar value | \$.01 | | 03/14 | /2013 | 2013 | | | A | | 2,400 | 1) | Α | \$ | 0 | 42,707 | | D | |
| Common | Stock, p | ar value | \$.01 | | 03/14 | /2013 | | | | F | | 896(2) | | D | \$15 | 5.32 | 32 41,811 | | 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. Conversi or Exerci Price of Derivativ Security | on Date se (Mon | | 3A. Deem Execution if any (Month/Da | Date, | Code (Inst | | | | 6. Date I Expirati (Month/I | on Dat | | Amount of | | str. 3 | 8. Price o Derivativ Security (Instr. 5) | | / O Fe D oi (I) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | Со | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or | ount nber ıres | | | | | | | | |

Explanation of Responses:

- 1. 2,400 shares of restricted stock were granted to the reporting person which vest in four equal annual installments, commencing on March 14, 2014.
- 2. This disposition is the result of shares being withheld in order to cover tax withholding obligations in connection with the vesting of restricted stock previously granted and reported by the reporting person.

Remarks:

GARY S. MEADE 03/25/2013

** 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.