Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject	ST
to Section 16. Form 4 or Form 5	
obligations may continue. See	

ATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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>						2. Issuer Name and Ticker or Trading Symbol BIG 5 SPORTING GOODS Corp [BGFV]									5. Relationship of Repor (Check all applicable) X Director			on(s) to Is		
(Last)	,	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/15/2023										Officer (give title below)		Other (s below)	specify	
C/O BIG 5 SPORTING GOODS CORPORATION 2525 EAST EL SEGUNDO BLVD.					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) EL SEG	(Street) EL SEGUNDO CA 90245				_							Form filed by More than One Reporting Person								
(City)	(S	tate) (2	Zip)		$ _{\Box}$	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a desatisfy the affirmative defense conditions of Rule 10b5-1(c). See Instru									contract, instruction or written plan that is intended to ruction 10.					
		Table	l - Noi	n-Deriva	ative S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	iciall	y Own	ed				
			2. Transaction Date (Month/Day/Year)		Exe if ar	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction D		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			, 4 and Securi Benefi Owned		ties cially I Following	6. Own Form: (D) or I (I) (Inst	Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) or (D)		rice	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)				
Common	Stock, par	value \$.01		09/15/	2023				A		1,610(1)	A	4	\$ <mark>0</mark>	88	8,358	58 D			
Common Stock, par value \$.01														14,143(2)			I	By the Lilac II Trust dated June 28, 2000		
		Ta									osed of, convertib				Owne	d				
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Transaction 3A. Dee		4. Transa	4. Transaction Code (Instr.		5. Number			isable and te	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	y O Fo O (I)	D. wnership orm: irect (D) r Indirect) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	Code V		(D)	Date Exercis	Date Exp Exercisable Dat		Title	Amou or Numb of Share	er						

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 equity 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 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.

IAN R. LANDGREEN, ATTORNEY-IN-FACT

09/19/2023

** 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.