SCHLAUCH THOMAS J

Form 4

November 12, 2009

VALUE \$.01

| FORM 4 LINITED STATES SECURITIES AND EVCHANCE COMMISSION | | | | | | | OMB APPROVAL | | | | | |
|---|-------------------------------------|-------|---|---|-------------------------------------|--------------------------|----------------|--|---|---|--------------------------|--|
| | UNITE | D ST | ATES | | TIES ANdington, D | | | GE C | OMMISSION | OMB Number: | 3235-0287 | |
| Check this lif no longer subject to Section 16. Form 4 or Form 5 obligations may continu See Instruct 1(b). | Filed p | oursu | ant to | Section 16(| SECURIT (a) of the S ity Holdin | FIES Securities ag Compa | s Exc any A | hange Act of | Act of 1934, 1935 or Section | Expires: Estimated a burden hou response | • | |
| (Print or Type Res | sponses) | | | | | | | | | | | |
| 1. Name and Address of Reporting Person * SCHLAUCH THOMAS J | | | 2. Issuer Name and Ticker or Trading Symbol BIG 5 SPORTING GOODS CORP [BGFV] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| (Last) C/O BIG 5 SP CORPORATI SEGUNDO B | ON, 2525 E | | S | 3. Date of E (Month/Day 11/09/200 | | saction | | | Director _X_ Officer (give below) Senio | | Owner er (specify | |
| | (Street) 4. If Amend Filed(Month | | | | lment, Date Original //Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| EL SEGUND | O, CA 90245 | 5 | | | | | | | Form filed by M Person | | | |
| (City) | (State) | (Zi | p) | Table 1 | I - Non-Der | ivative Se | curitie | es Acqu | ired, Disposed of, | , or Beneficial | ly Owned | |
| (Instr. 3) any | | | eemed tion Date, if h/Day/Year) | 3. 4. Securities Acquired Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) | | | of | Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| COMMON STOCK, PAR VALUE \$.01 | 11/09/2009 | | | | Code V | Amount 10,142 | or (D) | Price | (Instr. 3 and 4) 12,589 | D | | |
| COMMON STOCK, PAR | | | | | | | | | 5,000 | I | By Schlauch Family | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Trust

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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.

SEC 1474 (9-02)

Other

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative | 2. Conversion | 3. Transaction Date (Month/Day/Year) | | 4. | 5. onNumber | 6. Date Exerc Expiration D | | 7. Titl | | 8. Price of Derivative | 9. Nu Deriv |
|------------------------|---|--------------------------------------|----------------------|--------------------|----------------|-------------------------------|--------------------|-----------------|--|------------------------|---|
| Security (Instr. 3) | or Exercise Price of Derivative Security | (Month/Day/Tear) | any (Month/Day/Year) | Code (Instr. 8) | of | (Month/Day/e | | Under Securi | rlying | Security (Instr. 5) | Secur Bene Owne 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 | | | | | |
|--------------------------------|---------------|-----------|---------|--|--|--|
| | Director | 10% Owner | Officer | | | |

SCHLAUCH THOMAS J
C/O BIG 5 SPORTING GOODS CORPORATION
2525 EAST EL SEGUNDO BLVD
EL SEGUNDO, CA 90245
Senior
VP,
Buying

Signatures

GARY S. MEADE, ATTORNEY-IN-FACT

11/10/2009

**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).

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.

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