Edgar Filing: NATIONAL BEVERAGE CORP - Form 4

NATIONAL E Form 4 February 10, 2		CORP									
FORM	Δ								OMB AF	PROVAL	
	UNITE	Washington, D.C. 20549							OMB Number:	3235-0287	
Check this if no longer subject to Section 16. Form 4 or Form 5	STATI		GES IN BENEFICIAL OWNERS SECURITIES					Expires: January Estimated average burden hours per response			
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
(Print or Type Res	sponses)										
1. Name and Add CONLEE CE	2. Issuer Name and Ticker or Trading Symbol NATIONAL BEVERAGE CORP [FIZZ]				5. Relationship of Reporting Person(s) to Issuer						
					Ρ	(Check all applicable)					
(Last) (First) (Middle) 8100 SW 10TH STREET, SUITE 4000			3. Date of Earliest Transaction (Month/Day/Year) 02/08/2016				_X_ Director 10% Owner Officer (give title Other (specify below) below)				
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
PLANTATIO	N, FL 33324							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Table	l - Non-Der	vivative Se	ecuriti	es Acqu	iired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	(ear) Execu any		3. Transactio Code (Instr. 8)	on(A) or D (D) (Instr. 3,	4 and (A) or	d of 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
COMMON STOCK	02/08/2016			Code V X	3,000 (1)	(D) A	Price \$ 0.01 (1)	30,840	D		

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

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.

 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. Transactio Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
KEEP STOCK OPTION	\$ 0.01 (<u>1</u>)	02/08/2016		Х	3,000	05/27/2015	05/26/2019	COMMON STOCK	3,000 (1)

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Reporting Owners

Reporting Owner Name / Addr	ress Relationships							
1	Director	10% Owner	Officer	Other				
CONLEE CECIL D 8100 SW 10TH STREET SUITE 4000 PLANTATION, FL 33324	Х							
Signatures								
/s/ Cecil D. Conlee	02/10/2016							

<u>**</u>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).

Reflects exercise of options granted to Mr. Conlee under the Company's Key Employee Equity Partnership Program ("KEEP") on May 27, 2009. KEEP participants receive a grant equal to 50% of the number of shares of the Company's common stock purchased on the

 open market. KEEP options are granted at an initial exercise price of 60% of the purchase price of the shares acquired and such price is reduced to the par value of the Company's common stock over a six-year vesting period. Reference is made to Exhibit 10.8 of the Company's Form 10-K for the year ended May 2, 2015.

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.