FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPRO	VAL								
	OMB Number:	3235-0287								
l	Estimated average burden									
	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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* CONLEE CECIL D						2. Issuer Name and Ticker or Trading Symbol NATIONAL BEVERAGE CORP [FIZZ]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) $06/10/2013$								-	give title		Other (s below)	pecify	
8100 SW 10TH STREET SUITE 4000					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)	ATION FI	L :	33324										X		•		one Repo		
(City)	(S	tate) (Zip)																
		Tab	le I - No	on-Deriv	ative S	Sec	urities	Acc	quired, D)isp	osed o	f, or Ben	eficially	y Owned					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution Date,			3. Transaction Code (Instr.) 8)		4. Securities Acquired Disposed Of (D) (Instr. and 5)			5. Amour Securitie Beneficia Owned Followin	s	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	d tion(s)		4)	mstr. 4)	
			Tabl			_													
			Tabl						quired, Di s, options					vned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution	ned on Date,		call		ants eer ve es d		, COI ercisa Date	nvertible		Amount es Security		9. Numb derivativ Securitic Benefici Owned Followir Reporte Transac (Instr. 4)	ve es ially ng d tion(s)	10. Ownershi Form: Direct (D) or Indirect (I) (Instr. 4)	Benefici Ownersh	ect ial hip
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Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	3A. Deer Execution	ned on Date,	., puts, 4. Transact Code (In 8)	call	5. Numb of Derivativ Securitie Acquirer (A) or Dispose of (D) (Instr. 3, and 5)	er ve es d	Date Exercisabl	Exp Date	nvertible able and arr) rpiration ate	7. Title an of Securiti Underlying Derivative (Instr. 3 ar	Amount or Number of Shares	8. Price of Derivative Security (Instr. 5)	derivativ Securiti Benefici Owned Followir Reporte Transac (Instr. 4)	ve es ally ng d tion(s)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4)	of Indire Beneficia Ownersh	ect ial hip

Explanation of Responses:

1. Under the company's Key Employee Equity Partnership Program ("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 common stock over a 6 year vesting period. As a result of open market stock purchases made by Mr. Conlee between April 2009 and January 2010, he was granted KEEP options on June 10, 2013. Reference is made to Exhibit 10.8 of the company's 10-k for the year ended April 28, 2012.

<u>/s/ Cecil D. Conlee</u> <u>06/12/2013</u>

** 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.