FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

	of Section 30(ii) of the investment company Act of 1340											
1. Name and Address of Reporting Person* Cagliardi Nick R 2. Date of Event Requiring Statement (Month/Day/Year) 07/27/2009				nent	3. Issuer Name and Ticker or Trading Symbol HANSEN NATURAL CORP [HANS]							
(Last) 550 MONICA	(First) CIRCLE	(Middle)				tionship of Reporting Perso all applicable) Director	10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)			
SUITE 201					X	Officer (give title below)	Other (spe below)	cify	6. Individual or Joint/Group Filing (Check Applicable Line)			
(Street)	CA	92880				COO - DSD Hansen	Beverage		X		y One Reporting Person y More than One erson	
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						ally Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock						0	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable a Expiration Date (Month/Day/Year)			ate	d 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) Or Exe		rcise Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)				
			Date Exercisable	Expiration Date	ı Title		Amount or Number of Shares	Derivat Securit	tive	or Indirect (I) (Instr. 5)		

Explanation of Responses:

Nick R. Gagliardi

08/03/2009

** 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 5 (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.