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Section 1: 4 (FORM 4 SUBMISSION)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPRO	VAL	
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longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b). STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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	Туре	Responses)	
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Name and Address of Reporting Pe	2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer				
Koefoed William A	BANK OF THE OZARKS INC [OZRK]						(Check all appli X Director	cable) 10% Owner			
17901 CHENAL PARKWAY, A	3. Date of Earliest Transaction (Month/Day/Year) 05/08/2017						Officer (give title below)	Other (specify b	pelow)		
(Street) LITTLE ROCK, AR 72231	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 _Form filed by More than One Reporting Person				
(City) (State)	(Zip)	Ta	Table I - Non-Derivative Securities Acqu					uired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (Instr. 8)		1		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
			Code	V	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock	05/08/2017	Â	A	Â	1,034	A	\$ 0 (1)	3,578	D	Â	

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.

SEC 1474 (9-02)

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

1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature					
Derivative	Conversion	Date	Execution Date, if	Transact	ion	Numb	mber and Expiration Date		Amou	ınt of	Derivative	Derivative	Ownership	of Indirect						
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day/Year)		Unde	rlying	Security	Securities	Form of	Beneficial					
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Deriv	ative	ve		Secur	ities	(Instr. 5)	Beneficially	Derivative	Ownership					
	Derivative					Secur	ities			(Instr.	3 and		Owned	Security:	(Instr. 4)					
	Security					Acqu	ired			4)			Following	Direct (D)						
	-					(A) or	r						Reported	or Indirect						
						Dispo	sed						Transaction(s)	(I)						
						of (D))						(Instr. 4)	(Instr. 4)						
						(Instr.	. 3,													
						4, and	15)													
											Amount									
								Date	Expiration		or									
								Exercisable Date			*	*		Title	Number					
								Excicisable Date	ACICISADIC DAIC		of									
				Code	V	(A)	(D)				Shares			1						

Reporting Owners

Bonouting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Koefoed William A 17901 CHENAL PARKWAY PO BOX 8811 LITTLE ROCK, AR 72231-8811	ÂX	Â	Â	Â			

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Signatures

/s/ William A. Koefoed	Â	À 05/08/2017
**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).
- (1) Represents annual grant of common stock pursuant to the Bank of the Ozarks, Inc. Non-Employee Director Stock Plan.

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. (Back To Top)