~

Go to...

Toggle SGML Header (+)

Section 1: 4 (FORM 4)

FORM	4
------	---

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						
hours per response	0.5					

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 Type Responses)

1. Name and Address of Reporting Pers McKinney Gregory L	on *	2. Issuer Name and Ticker or Trading Symbol BANK OF THE OZARKS INC [OZRK]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
17901 CHENAL PARKWAY,Â	(Middle) P.O. BOX 8811						X_Officer (give title below)Other (specify below) Chief Financial Officer & CAO			
(Street) LITTLE ROCK, AR 72231-8	3811	4. If Amendment, Date Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applic X. Form filed by One Reporting Person Form filed by More than One Reporting Person						Line)		
(City) (State)	(Zip)		Table l	- Nor	-Derivati	ve Secu	rities Acqu	ired, Disposed of, or Beneficially Ow	ned	
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)	ction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price		(I) (Instr. 4)	
Employee Stock Option (Right t Buy)	^o 07/18/2012	Â	М	Â	4,600	А	\$16.028	18,000	D	Â
Common Stock	07/18/2012	Â	S	Â	4,600	D	\$34.35	13,400	D	Â
Common Stock	Â	Â	Â	Â	Â	Â	Â	2,020	I	Shares held in 401(k) at 7/18/2012

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

SEC 1474 (9-02)

Persons who respond to the collection of information contained SEC 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

	(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)																		
1. Title of	2.	3. Transaction	3A. Deemed	4.	5. Number				6. Date Exercisable and		7. Title and Amount		9. Number of	10.	11. Nature				
Derivative	Conversion	Date	Execution Date, if	Transaction of		ansaction of		Fransaction of		Expiration Date of		Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	Code Derivative		(Month/Day/Y	ear)	Securities		Security	Securities	Form of	Beneficial					
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	3)	Secu	irities			(Instr. 3 and	4)	(Instr. 5)	Beneficially	Derivative	Ownership				
	Derivative					Acq	uired						Owned	Security:	(Instr. 4)				
	Security					(A)	or						Following	Direct (D)					
						-	osed						1	or Indirect					
						of (I	· ·						Transaction(s)						
						· ·	r. 3, 4,						(Instr. 4)	(Instr. 4)					
						and	5)												
											Amount								
								Date	Expiration		or								
								Exercisable	Date	Title	Number								
								Exercisable	Date		of								
				Code	V	(A)	(D)				Shares								
Employee																			
Stock																			
Option	\$16.028	07/18/2012	Â	М	Â	Â	4 600	10/17/2009	10/17/2013	Common	4 600	\$16.028	0	D	Â				
	\$10.020	07/10/2012	71	141	\mathbf{n}	Δ	4,000	10/1//2007	10/1//2015	Stock	7,000	\$10.020	U	D	11				
(Right to																			
Buy)																			

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
McKinney Gregory L	Â	Â	Chief Financial Officer & CAO	Â		

26/2021		Document Conter	nts
17901 CHENAL PARKWAY P.O. BOX 8811 LITTLE ROCK, AR 72231-8811			

Signatures

/s/ Gregory L. McKinney	07/19/2012
***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. (Back To Top)