Tyson Holly R Form 4 March 21, 2019

## FORM 4

# **OMB APPROVAL**

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

**OMB** 3235-0287 Number:

Check this box if no longer subject to Section 16.

January 31, Expires: STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

2005 Estimated average burden hours per

0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

**SECURITIES** 

response...

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person _	2. Issuer Name <b>and</b> Ticker or Trading
Tyson Holly R	Symbol
	DICKS SPORTING GOODS INC

5. Relationship of Reporting Person(s) to Issuer

[DKS] (Last) (First) (Middle) 3. Date of Earliest Transaction

(Month/Day/Year)

Director 10% Owner \_\_ Other (specify X\_ Officer (give title )

(Check all applicable)

03/19/2019

below) below) See Remarks

(Street)

(Ctata)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

CORAOPOLIS, PA 15108

345 COURT STREET

(City)	(State) (Z	Zip) Table	e I - Non-Do	erivative Securi	ties Ac	quired, Disposed	of, or Beneficial	lly Owned
1.Title of	2. Transaction Date		3.	4. Securities		5. Amount of	6. Ownership	7. Nature of
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any	Code	onAcquired (A) o Disposed of (D		Securities Beneficially	Form: Direct (D) or	Indirect Beneficial
(msu: 3)		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and	1	Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)
				(A) or		Reported Transaction(s) (Instr. 3 and 4)		
			Code V	Amount (D)	Price	(mstr. 5 and 1)		
Common Stock, par value \$0.01 per share	03/19/2019		A	3,383 (1) A	\$0	25,613	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

### Edgar Filing: Tyson Holly R - Form 4

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

1. Title of	f 2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	le and	8. Price of	9. Nu
Derivativ	e Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	ate	Amou	ınt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	/Year)	Under	rlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities	S		(Instr.	. 3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A		
									Amount		
						Date	Expiration	T:41-	or Namel		
						Exercisable Da	sable Date		Number		
				C-1- V	(A) (D)				of		
				Code v	(A) (D)				Shares		

## **Reporting Owners**

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

Tyson Holly R

See Remarks 345 COURT STREET

CORAOPOLIS, PA 15108

### **Signatures**

/s/ Mark Worley by Power of 03/21/2019 Attorney

\*\*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).

Represents shares earned with respect to a performance-based stock award granted on April 3, 2017. The issuer's compensation committee certified the attainment of the performance measures on March 19, 2019. These shares are subject to time-based vesting requirements.

#### **Remarks:**

Officer Title: SVP, Chief Human Resources Officer

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.

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