Edgar Filing: BANK OF THE OZARKS INC - Form 4

BANK OF 7 Form 4 January 20,	THE OZARKS IN 2017	NC									
	ЛЛ									IB APPRO	VAL
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							N OMB Numbe	er: 32	3235-0287	
Check th if no lon	gar								Expire	Jan s:	uary 31, 2005
subject t Section Form 4 d	16. SIAIE N	STATEMENT OF CHANGES IN BENEFICIAL O SECURITIES						VNERSHIP O	Estima burder	ated average n hours per	
Form 5 obligatio may con <i>See</i> Instr 1(b).	Filed pur ons Section 17((a) of the l	Public U	Itility Ho		npan	y Act	nge Act of 1934 of 1935 or Sect 940		56	0.5
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> GLEASON GEORGE G II			2. Issuer Name and Ticker or Trading Symbol BANK OF THE OZARKS INC					5. Relationship of Reporting Person(s) to Issuer			
			[OZRK			5 11 (C	(Cl	heck all appli	cable)	
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)					X_ Director 10% Owner X_ Officer (give title Other (specify			
17901 CHE BOX 8811	ENAL PARKWA	Y, P.O.	01/18/2	-				below)	belov Chairman & (/	
	(Street)	0011		endment, D onth/Day/Yea	Date Origina ar)	1		6. Individual of Applicable Line) _X_ Form filed b Form filed b	-	ing Person	
	OCK, AR 72231-							Person	•	1 0	-
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Secur	ities A	cquired, Disposed	l of, or Bene	ficially Ow	ned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactic Code (Instr. 8) Code V	on(A) or Dis (D) (Instr. 3, 4	posed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature Indirect Benefici: Ownersh (Instr. 4)	al iip
Common Stock	01/18/2017			А	48,387 (1)	А	\$0	1,051,070	D		
Common Stock								1,974,485	Ι	Shares 401(k) 01/18/2	at
Common Stock								163,176	Ι	Shares by Spo	
Common Stock								4,800	I	Shares Trust fo Adult (or

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Common Stock					2,57	71,200 I		Shares held in Gleason Trust		
Common Stock					180	,124 I	b w C w d a	Shares held by Trust of which Mr. Gleason, his wife, and lescendants are beneficiaries		
Reminder: Rej	port on a sepa	rate line for each cla	ass of securities benefic	cially owned	l directly or indir	ectly.				
			informat required	who respond tion contained I to respond ur a currently va	in this form a nless the form	are not n	e not (9-02)			
			vative Securities Acqui puts, calls, warrants, o							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	onversion (Month/Day/Year) Execution Data Exercise any ice of (Month/Day/Y erivative		Code	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Dat (Month/Day/Y	. Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
- 1				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option (Right to Buy)	\$ 52.08	01/18/2017		А	48,387	01/18/2020	01/18/202	24 Common Stock	48,387	
Report	ting Ov	wners								
Reporting	Owner Name	e / Address	Rela	ationships						
Reporting Owner Name / Address Director 10% Owner				Officer Other						
GLEASON	GEORGE	GII								

Chairman & CEO

P.O. BOX 8811

17901 CHENAL PARKWAY

LITTLE ROCK, AR 72231-8811

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Signatures

/s/ George G Gleason

01/20/2017

**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).
- These shares were issued under the Company's Restricted Stock and Incentive Plan in accordance with Rule 16b-3(d) and are subject to a (1) substantial risk of forfeiture until vested. 100% of these shares vest on 01/18/2020, three years after the date of grant, if the individual
- remains employed with the Company through such date.

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.