BANK OF THE OZARKS INC

Form 4

April 19, 2007

FORM 4

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

Check this box if no longer

subject to Section 16. Form 4 or Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

ARNOFIAN

2. Issuer Name and Ticker or Trading

Symbol

BANK OF THE OZARKS INC

[OZRK]

(Last)

(First) (Middle) 3. Date of Earliest Transaction

(Month/Day/Year) 04/18/2007

12615 CHENAL PARKWAY, P.O. **BOX 8811**

(Street)

LITTLE ROCK, AR 72231-8811

4. If Amendment, Date Original

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

5. Relationship of Reporting Person(s) to

(Check all applicable)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Issuer

below)

X_ Director

Applicable Line)

Officer (give title

(City)

1. Title of

Security

(Instr. 3)

2. Transaction Date 2A. Deemed

(State)

(Month/Day/Year) Execution Date, if

(Zip)

3. Code (Month/Day/Year) (Instr. 8)

4. Securities TransactionAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following (A)

6. Ownership Form: Direct (I) (Instr. 4)

7. Nature of Indirect (D) or Indirect Beneficial Ownership (Instr. 4)

10% Owner

Other (specify

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

Reported Transaction(s)

or (Instr. 3 and 4) Code V Amount (D) Price

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.

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

2. 1. Title of Derivative Security Conversion 3. Transaction Date 3A. Deemed

(Month/Day/Year) Execution Date, if Transaction of Derivative Expiration Date

5. Number

6. Date Exercisable and

7. Title and Amou Underlying Securi

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| (Instr. 3) | or Exercise Price of Derivative Security | | any (Month/Day/Year) | Code (Instr. 8 | 3) | Securitie Acquired (A) or Disposed (D) (Instr. 3, and 5) | d d of | (Month/Day/Y | Year) (Instr. 3 | | 4) |
|--|---|------------|-------------------------|-------------------|----|--|-----------|---------------------|--------------------|-----------------|--------------------------------|
| | | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amo or Nun of Shar |
| Non-Employee Director Stock Option (Right to Buy) | \$ 30.355 | 04/18/2007 | | M | | 1,000 | | 04/18/2007 | 04/18/2017 | Common Stock | 1,0 |

Deletionships

Reporting Owners

| Reporting Owner Name / Address | | Kelationsh | ups | |
|--------------------------------|----------|------------|---------|-------|
| | Director | 10% Owner | Officer | Other |

ARNOF IAN 12615 CHENAL PARKWAY, P.O. BOX 8811 X LITTLE ROCK, AR 72231-8811

Signatures

/s/ Ian Arnof by Donna Quandt, **POA**

04/18/2007

**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.

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