DICKS SPORTING GOODS INC Form 3 July 20, 2010 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB 2025 OMB

INITIAL STATEMENT OF 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)

Person * S MOSSE DAVID I (Statement (Month/Day/Year)	3. Issuer Nam DICKS SPO			ng Symbol 9 INC [DKS]
(Last) (First) (Middle)	07/12/2010	4. Relationshi Person(s) to Is			5. If Amendment, Date Original Filed(Month/Day/Year)
345 COURT STREET (Street) CORAOPOLIS, PA 15108		Director X Officer (give title below	all applicable) 10% (Other /) (specify belo punsel & Corp	Owner ow)	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)	Table I - N	on-Derivat	ive Securiti	es Ber	neficially Owned
1.Title of Security (Instr. 4)	2. Amount of Beneficially ((Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Natu Owner (Instr.	1
No securities are beneficially owned	1 0		D	Â	
Reminder: Report on a separate line for each owned directly or indirectly.	a class of securities benefici	ally SI	EC 1473 (7-02)	
Persons who respo information contain	and to the collection of ned in this form are not d unless the form displa 3 control number.	ays a			
Table II - Derivative Securit	ies Beneficially Owned (e.	g., puts, calls,	warrants, opt	ions, co	onvertible securities)

1. Title of Derivative Security2. Date(Instr. 4)Expira (Month/D)		ate	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

Shares (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director 10% Owned		Officer	Other			
MOSSE DAVID I 345 COURT STREET CORAOPOLIS, PA 15108	Â	Â	SVP, Gen. Counsel & Corp. Sec.	Â			
Signatures							
/s/ David I. 07/ Mosse 07/	/19/2010						
<u>**</u> Signature of Reporting Person	Date						
Reporting Person							

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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.