

DSW Inc.
Form 3/A
July 13, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

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)

<p>1. Name and Address of Reporting Person *</p> <p>Â SCHOTTENSTEIN JAY L</p> <p>(Last) (First) (Middle)</p> <p>SCHOTTENSTEIN STORES CORPORATION,Â 1800 MOLER ROAD</p> <p>(Street)</p> <p>COLUMBUS,Â OHÂ 43209</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>08/08/2008</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>DSW Inc. [DSW]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) Chairman and CEO</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p> <p>08/08/2008</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person</p>
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Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Class B Common Shares	27,702,667	I	By Retail Ventures, Inc. ⁽¹⁾

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

SEC 1473 (7-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Warrants	Â (2)	06/11/2012	Class A Common Shares	328,915 (3)	\$ 19 (3)	I	By: Schottenstein Stores Corporation (4)
Warrants	Â (2)	Â (5)	Class A Common Shares	1,973,684 (6)	\$ 19 (6)	I	By: Schottenstein Stores Corporation (4)

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
SCHOTTENSTEIN JAY L SCHOTTENSTEIN STORES CORPORATION 1800 MOLER ROAD COLUMBUS, OH 43209	Â X	Â X	Â Chairman and CEO	Â

Signatures

By: Robert J. Tannous,
Attorney-in-Fact

07/13/2005

__Signature of Reporting Person

Date

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).
- (1) See Footnote (1) on Attached Exhibit 99.
- (2) See Footnote (2) on Attached Exhibit 99.
- (3) See Footnote (3) on Attached Exhibit 99.
- (4) See Footnote (4) on Attached Exhibit 99.
- (5) See Footnote (5) on Attached Exhibit 99.
- (6) See Footnote (6) on Attached Exhibit 99.

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Remarks:

This Form 3 is being amended to reflect the actual date of event and to provide updated information. EXHIBIT INDEX - Exhibit 99 - Footnotes

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.