FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | S IN BENEFICIAL | OWNERSHIP |
|-----------|------------|-----------------|------------------|
| | | | |

| ı | OMB APPRO | IVAL |
|---|-------------------------|-----------|
| | OMB Number: | 3235-0287 |
| l | Estimated average burde | en |
| | hours per response: | 0.5 |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* <u>Jackson Robert Michael</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol EZCORP INC [EZPW] | | | | | | | | | | Check all a Di | ationship of Reportin k all applicable) Director Officer (give title below) Vice Presi | | 10% O | wner |
|--|---|--|--|---|---|-----|---------|--------------------------------------|--|--|--------------------|---|--------------------------------|--|--|---|---|---|--|
| (Last) (First) (Middle) 1901 CAPITAL PARKWAY | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/01/2008 | | | | | | | | | | below) | (specify | | | | |
| (Street) AUSTIN (City) | TX (Sta | | 78746 Zip) | | 4. If | Ame | ndment | , Date o | f Original | Filed | (Month/Da | ıy/Year |) | | ne) X Fe | l or Joint/Grou orm filed by On orm filed by Mo erson | ie Re | porting Pers | on |
| | | Tabl | e I - Nor | n-Deriva | ative | Sec | curitie | s Acc | quired, | Dis | posed o | f, or I | Bene | eficia | ally Ow | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | Execution Date | | | n Date, | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) d Of (D) (Instr. 3, 4 | | | nd Sec Ber Ow | mount of urities eficially ned Following orted | For (D) | Ownership m: Direct or Indirect Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A (C | N) or D) | Price | Tra | nsaction(s) tr. 3 and 4) | action(s) | | (111501.4) |
| Class A Non-Voting Common Stock 10/0 | | | | 10/01 | /2008 | | A | | 3,000 ⁽¹⁾ A | | Α | (2 | 9,000 ⁽³⁾ | | | D | | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | y Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution D if any (Month/Day/ | Date, Transacti Code (Ins | | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | 8. Price of Derivative Security (Instr. 5) | | , | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amo or Num of Shar | ber | | | | | |

Explanation of Responses:

- 1. This Restricted Stock Award is issued with a 3 year "cliff" vesting.
- 2. Closing market value on date of award is \$18.28. However, no consideration was paid for the award other than services rendered and to be rendered by the Reporting Person.
- 3. The Total Non-Derivative Securities Beneficially Owned does not include 54,000 Derivative Securities currently held by Reporting Person.

Remarks:

/s/ Laura Jones Attorney-in-

Fact

** Signature of Reporting Person

10/02/2008

Date

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

- * 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.

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 Number.