| SEC F | Form 4 |
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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 |
| obligations may continue. See |
| Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL OMB Number: 3235-0287

| Ш | hours per response: | 0.5 |
|---|--------------------------|-----|
| | Estimated average burden | |

| 1 Indific and Address of Reporting Leson | | | 2. Issuer Name and Ticker or Trading Symbol EZCORP INC [EZPW] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---------|----------------------|--|---|---|-----------------------|--|--|--|
| | | | t | X | Director | 10% Owner | | | |
| L (Last) (Eirst) (Middlo) L | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 01/29/2014 | | Officer (give title below) | Other (specify below) | | | |
| | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | |
| (Street) AUSTIN | TX | 78746 | | Line) X | Form filed by One Report Form filed by More than C Person | ů. | | | |
| (City) | (State) | (Zip) | | | | | | | |
| | - | Table I - Non-Deriva | tive Securities Acquired, Disposed of, or Benefi | cially (| Owned | | | | |

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | Securities Beneficially | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|------|---|---|---------------|-------|------------------------------------|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Class A Non-Voting Common Stock | 01/29/2014 | | A | | 10,000 ⁽¹⁾ | Α | (2) | 10,000 ⁽³⁾ | D | |

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

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deriv Secu Acqu (A) or Dispo of (D) (Instr | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 7. Title Amour Securi Underl Deriva Securi and 4) | nt of ties ying tive ty (Instr. 3 | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---|---|--|---|------------------------------|---|--|---|---------------------|---|---|---|--|--|--|--|
| | | | | Code | v | | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. This Restricted Stock Award is issued with a 2 year vesting period with 5,000 shares vesting on October 1, 2014 and 5,000 vesting on October 1, 2015.

2. Closing market value on date of award is \$11.25. 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 includes 10,000 unvested Restricted Stock Awards.

Remarks:

/s/ Laura Jones Attorney-in-Fact

01/31/2014

Date

** Signature of Reporting Person

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.