FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number: 3235-0104							
Estimated average burden							
hours per response:	0.5						

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

CHISM DANIEL M	2. Date of Event Requiring Statem Month/Day/Year) 05/09/2017	ent .	3. Issuer Name and Ticker or Trading Symbol EZCORP INC [EZPW]							
(Last) (First) (Middle) 2500 BEE CAVE ROAD			Relationship of Reporting Perso (Check all applicable) Director	10% Owner Other (specify below)		5. If Amendment, Date of Original Filed (Month/Day/Year)				
BLDG, 1, SUITE 200 (Street)			X Officer (give title below) Chief Financial (Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One				
ROLLINGWOOD TX 78746 (City) (State) (Zip)						Reporting P				
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)		Amount of Securities eneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)					
No securities beneficially held.		0(1)	D							
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable a Expiration Date (Month/Day/Year)			Underlying Derivative Security (Instr. 4) Co		Convers or Exerc	cise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivati Security	ve or Indirect				

Explanation of Responses:

1. The purpose of this filing is to report the election of the Reporting Person as an Officer. At the time of this filing, the Reporting Person does not hold Non-Derivative or Derivative Securities of EZCORP, Inc.

Remarks:

/s/ Carrie Putnam, attorney-in-

<u>fact</u>

** Signature of Reporting Person

Date

05/09/2017

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

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

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.