

**FORM 5**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL	
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**ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

- Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
- Form 3 Holdings Reported.
- Form 4 Transactions Reported.

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>VOLPE MICHAEL A</u>  (Last) (First) (Middle) <u>1901 CAPITAL PKWY</u>  (Street) <u>AUSTIN TX 78746</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>EZCORP INC [ EZPW ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below)  <u>Vice President</u>
	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) <u>09/30/2007</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)  <input checked="" type="checkbox"/> Form filed by One Reporting Person  <input type="checkbox"/> Form filed by More than One Reporting Person

**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)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Amount	(A) or (D)	Price			
Class A Non-Voting Common Stock	05/10/2007		A	97.614	A	\$14.52	97.614	I	EZCORP, Inc. 401(K)
Class A Non-Voting Common Stock	05/17/2007		A	31.355	A	\$14.52	128.969	I	EZCORP, Inc. 401(K)
Class A Non-Voting Common Stock	07/19/2007		D	0.116	D	\$12.95	128.853	I	EZCORP, Inc. 401(K)
Class A Non-Voting Common Stock	07/19/2007		D	15.679	D	\$12.95	113.174	I	EZCORP, Inc. 401(K)
Class A Non-Voting Common Stock	07/26/2007		D	0.067	D	\$12.49	113.107	I	EZCORP, Inc. 401(K)
Class A Non-Voting Common Stock	07/26/2007		D	75	D	\$12.49	38.107 <sup>(1)</sup>	I	EZCORP, Inc. 401(K)

**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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	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)
					(A)	(D)	Date Exercisable	Expiration Date					

**Explanation of Responses:**

1. This report on the 401(k) transaction is voluntary. The sole purpose is to disclose EZCORP'S matching contributions pursuant to EZCORP, Inc. 401(k) Plan and Trust (the "Plan"). The disposition of stock reflects a forfeiture of shares of stock pursuant to the terms of the Plan. The information in this report is based on a plan statement dated as of September 30, 2007.

**Remarks:**

/s/ Laura Jones Attorney-in-Fact 11/13/2007

\*\* Signature of Reporting Person 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.