FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| STATEMENT OF CHANGES IN BENEFICIAL | OWNERSHIP |
|------------------------------------|------------------|
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| OMB APP | ROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| 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

| Name and Address of Reporting Person* Given Lachlan P | | | | | 2. Issuer Name and Ticker or Trading Symbol EZCORP INC [EZPW] | | | | | | | | | k all applica Director | tionship of Reporting all applicable) Director Officer (give title | | Person(s) to Issuer 10% Owner Other (speci | | |
|---|---|--|--|---------------------------------------|---|---|------|---|---------|--|-----------------------|---------------------------------------|--|---------------------------|---|------------|--|--|--|
| | Last) (First) (Middle) 2500 BEE CAVE ROAD BLDG. 1, SUITE 200 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/17/2021 | | | | | | | | | below) | | | | · |
| (Street) ROLLINGWOOD TX 78746 | | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Ind Line) | | | | | | |
| (City) | (S | itate) | (Zip) | | | | | | | | | | | <u> </u> | | | | | |
| | | Ta | ble I - Nor | 1-Deri | ivativ | /e Se | curi | ities Acc | uired, | Dis | posed of | , or E | Benef | icially | Owned | | | | |
| Da | | | Date | Transaction ate Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | 5. Amoun Securities Beneficia Owned For Reported | es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | Code | v | Amount | (A (D | () or () | Price | Transacti (Instr. 3 a | on(s) | | | (11150.4) | | |
| Class A Non-Voting Common Stock | | | 11/1 | 17/202 | 7/2021 | | | | | 70,0930 | 1) | A | \$7.83 | 457,984 | | 4 D | | | |
| Class A Non-Voting Common Stock 11 | | | 11/1 | L7/202 | 7/2021 | | F | | 21,562(| (2) | D | \$7.83 436 | | 436,422 | | D | | | |
| | | | Table II - | | | | | | | | osed of, convertib | | | | wned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Dat if any (Month/Day/Ye | ate, | | ansaction ode (Instr. | | Derivative | | 6. Date Exercisable Expiration Date (Month/Day/Year) | | of Securities | | curity | 8. Price of Derivative Security (Instr. 5) | | e Over Section Ove | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | C | Code | v | (A) | (A) (D) [| | able | Expiration Date | Title | OI N Of | umber | | (Instr. 4) | 5.1(3) | | |
| Restricted Stock Units | \$7.83 | 11/17/2021 | | | М | | | 70,093 ⁽¹⁾ | 11/17/2 | 021 | 11/17/2021 | Class Non Votir Comn Stoc | n- ng 7 | 0,093 | \$783 | 272,84 | 47 | D | |

Explanation of Responses:

- 1. Restricted stock units convert into common stock on a one-for-one basis.
- 2. Represents shares withheld to cover tax liability associated with the vesting of restricted stock units.

Remarks:

/s/ Carrie Putnam, Attorney-in-

** Signature of Reporting Person

Fac

11/19/2021

indirectly

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.