FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OWNERSHIP

Machinaton	$D \subset$	205/10
Washington,	D.C.	20549

ANNUAL STATEMENT (OF CHANGES	IN BENEFICIAL

OMB APPR	OVAL
OMB Number:	3235-0362
Estimated average but	rden
hours per response:	1.0

Form 3 Holdings Reported

Instruction 1(b)

Form 4	Transactions F	Reported.	Fil	ed pursuant to or Section								1934						
1	d Address of Robert N	Reporting Person* <u>/lichael</u>		2. Issuer Name and Ticker or Trading Symbol EZCORP INC [EZPW]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (spec					Owner -			
(Last) 1901 CA	(Fir PITAL PAR	· ·	Middle)		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 09/30/2009						ar)	X Officer (give title Other (specific below) Vice President & CIO					w)`	
(Street) AUSTIN	TX		78746	4. If Amendment, Date of Original Filed (Month/Day/Year)						 Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting 					erson			
(City)	(Sta	ate) (Zip)											Pers	on			
		Tabl	e I - Non-Deriv	ative Seci	uritie	s Ac	quir	ed, Di	sposed	l of, o	r Be	nefici	ally	Owne	ed			
)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispose (D) (Instr. 3, 4 and 5)			isposed	5. Amount of Securities Beneficially Owned at end of		es ally	6. Ownership Form: Direct	ership 1: Direct	7. Nature of Indirect Beneficial Ownership		
			(MONIN/Day/Ye	ear) (8)		Amoun	i	(A) or (D)	Price			Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		(Instr. 4)	
Class A N Stock	fon-Voting (Common	02/18/2009		A			0.0	151	A		\$12.9		140.7571				EZCORP, Inc. 401(k)
Class A Non-Voting Common Stock 07/16/2009				D		0.5	671	D	\$10.8			140.19				EZCORP, Inc. 401(k)		
Class A Non-Voting Common Stock 08/31/2009		08/31/2009		A		57.9	9765	A	\$10.64			198.1665				EZCORP, Inc. 401(k)		
Class A Non-Voting Common Stock 09/11/2009				A		3.0	575	A	\$12.7157		7	201.8415(1)				EZCORP, Inc. 401(k)		
Class A Non-Voting Common Stock											13,000(2)			D				
		Та	able II - Deriva (e.g., p	tive Securi uts, calls,										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 Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deriv Secur Acqu (A) or Dispo	rivative curities quired or sposed (D) str. 3, 4 d 5)		ate Exerciration Dinth/Day/\(\frac{1}{2}\)	Amount of Securities Underlying Derivative Security (Instr. and 4) Amount of Security (Instr. and 4)		of es ng re (Instr. 3 Amount or Number	Dei	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i lly	10. Ownersh Form: Direct (D) or Indirec (I) (Instr.	Beneficial Ownership tt (Instr. 4)	

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, 2009.

2. The Total Non-Derivative Securities Beneficially Owned includes 13,000 unvested Restricted Stock Awards. The Total Non-Derivative Securities Beneficially Owned does not include 54,000 Derivative Securities currently held by Reporting Person.

Remarks:

11/12/2009

** 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.