FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average b | ourden | | | | | | | | |

0.5

hours per response:

| | Check this box if no longer subject to |
|--------|--|
| \neg | Section 16. Form 4 or Form 5 |
| J | 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

| 1 Name and Address of Departing Deven* | | | | | 2 19 | 2. Issuer Name and Ticker or Trading Symbol | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | | | |
|---|---|--|--|---------|-------------------|--|---------|--------------------------------------|------------------------------------|--|--|-------|-------------------|---|---|---|---|---|--|---------|--|--|
| Name and Address of Reporting Person* BRINKLEY STERLING B | | | | | | EZCORP INC [EZPW] | | | | | | | | | (Check all applicable) | | | | | | | |
| DRINKLET STEKLING D | | | | | | | | | | _ | | | | | X | Direc | tor | 10 | % Owne | er | | |
| (Last) (First) (Middle) | | | | | 3. D | Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | | Officer (give title below) | | | Other (specify below) | | | |
| 108 FORREST AVE. | | | | 04/ | 04/29/2011 | | | | | | | | | Chairman of the Board | | | | | | | | |
| - | | | | | | | | | | | | | | | | | | | | | | |
| (Street) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | |
| LOCUST NY 11560 | | | | | | | | | | | | | | , | Form | m filed by One Reporting Person | | | | | | |
| | | | | . | | | | | | | | | | Form filed by More than One Reporting Person | | | | | | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | r CI3 | on | | | | | |
| | | Tabl | e I - No | n-Deriv | ative | Se | curitie | s Acc | uired, | Dis | posed o | f, o | r Ben | efici | ally O | wne | ed | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Execution | | | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) I Of (D) (Instr. 3, 4 | | | 4 and S B O | | ount of ties cially d Following | 6. Ownersh Form: Dire (D) or Indir (I) (Instr. 4) | ct of Ir ect Ben Owr | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | , т | Reported Transaction(s) (Instr. 3 and 4) | | | (ins | str. 4) | | |
| Class A Non-Voting Common Stock 04/2 | | | | | 9/2011 | | | | G | | 1,500(1) | | D | \$0.0 | .00(2) 1,4 | | 62,735 ⁽³⁾ | D | | | | |
| | | Та | | | | | | | | | osed of, onvertib | | | | | ned | | , | • | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | n Date, | Date, Transaction | | | | 6. Date E Expiratio (Month/D | n Dat | Amount of Securities Underlying Derivative Security (Ins and 4) | | str. 3 | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | hip of In Ben O) Own ect (Ins | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nui of | nber | | | | | | | | |

Explanation of Responses:

- 1. These Non-Derivative shares currently held by Reporting Person are being gifted to North Shore-Long Island Jewish Health System Foundation.
- 2. Reported stock price is the closing price reported on NASDAQ on the date of the gift; however no consideration was received by the Reporting Person for the gift of shares being reported.
- 3. The Non-Derivative Securities held includes 181,536 shares held in a trust account.

Remarks:

/s/ Laura Jones Attorney-in-

Fact

05/02/2011

** 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.