Edgar Filing: CONNS INC - Form 4

CONNS INC													
Form 4													
October 16, 2	014									61 / F A			
FORM	4		S SECUD	ITIES			• T T A N	JCE	COMMISSION	т	PPROVAL		
-	UNIII	DSIAIL				ND EAC D.C. 205		NGE V		OMB Number:	3235-0287		
Check this	s box		• • a 5	migu	, 1	0.0.200					January 31,		
if no longer subject to STATEMENT OF CHANG				GES IN	N B	BENEFI	CIAI	LOW	NERSHIP OF	Expires:	2005		
subject to Section 16	.			SECU	SECURITIES					Estimated average burden hours per			
Form 4 or										response	•		
Form 5 obligation	0	*		. ,					ge Act of 1934,				
may conti				•		•	• •		f 1935 or Sectio	n			
See Instru	ction	30(h) of the Inv	vestmei	nt C	Company	Act	of 19	40				
1(b).													
(Print or Type R	esponses)												
				er Name and Ticker or Trading				g	5. Relationship of Issuer	f Reporting Per	son(s) to		
Haley Mark			Symbol	Symbol CONNS INC [CONN]									
C				L		-			(Check all applicable)				
(Last)	(First)	(Middle)		Earliest Transaction									
4055 TECHI	NOLOGY FO	REST	(Month/Da 10/14/20	(Day/Year)					Director 10% Owner X Officer (give title Other (specify				
BLVD., STE		JILLO I	10/14/20	14/2014					below) below) VP & Chief Accounting Officer				
, ~										-			
(Street) 4. If Amer Filed(Mon				ndment, Date Original					6. Individual or Joint/Group Filing(Check				
				.th/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person				
THE WOOD	LANDS, TX	77381								More than One Ro			
(City)	(State)	(Zip)	Table	e I - Non	-De	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction	emed 3. 4. Securities						5. Amount of	6. Ownership	7. Nature of			
Security	(Month/Day/Y	ion Date, if							Form: Direct				
(Instr. 3)		any (Month	CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)						Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
			· · · · · · · · · · · · · · · · · · ·					- /	Following	(Instr. 4)	(Instr. 4)		
							(A)		Reported Transaction(s)				
				Cale	V	A	or	Date	(Instr. 3 and 4)				
Common	10/14/2014			$A^{(1)}$	v	Amount	(D)	Price	4,098				
20111011						4,098	А	\$0		D			

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Haley Mark 4055 TECHNOLOGY FOREST BLVD., STE. 210 THE WOODLANDS, TX 77381			VP & Chief Accounting Officer				
Signatures							

/s/ Robert F. Bell, as attorney-in-fact 10/16/2014

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) Restricted Stock Units awarded to reporting person under the 2011 Omnibus Incentive Plan. Each RSU represents a contingent right to receive one share of common stock. The RSUs vest in 5 equal annual installments commencing on October 14, 2015.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.