FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
6	DMB Number:	3235-0287								
E	Estimated average burden									
h	ours 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

1. Name and Address of Reporting Person* WRIGHT THEODORE M						2. Issuer Name and Ticker or Trading Symbol CONNS INC [CONN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
					٦									Directo	r		10% Ov	vner	
(Last)	(F	irst)	(Middle)			Date of Earliest Transaction (Month/Day/Year)						- :	Officer below)	(give title	Other (specification)		specify		
796 STENDAL ROAD						12/05/2011								CEO/President					
(Street)							4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable					
LEWISTOWN MT 59457												Line	X Form filed by One Reporting Person						
(City)	(S	tate)	(Zip)											Form filed by More than One Reporting Person					
		Tal	ole I - No	n-Deri	ivativ	e Se	curi	ties Ac	quired,	Dis	posed o	f, or Ber	neficiall	y Owned					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,		3. Transaction Code (Instr. 8)			ies Acquire Of (D) (Inst	d (A) or r. 3, 4 and	Securitie Beneficia Owned F	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	on(s)			(111501.4)	
Common Stock 12/05/					05/201	2011		A		50,000) A	\$0.000	133	133,334		D			
			Table II -								osed of, convertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Date,	Code (In		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		е	7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	on(s)			
Employee Stock Option (right to buy)	\$11.86	12/05/2011			A			175,000	(2)		12/05/2016	Common stock	21,667	\$0.00 ⁽³⁾	175,00	00	D		

Explanation of Responses:

- 1. These shares of common stock are the shares underlying Restricted Stock Units ("RSUs"), which may only be settled in shares of Conn's common stock. The RSUs vest in three equal installments on December 5, 2012, December 5, 2013 and December 5 2014, provided, however, before in RSUs vest, the closing price of Conn's common stock must close at or above \$18 per share for at least 20 consecutive trading days.
- 2. The options vest in three equal installments on December 5, 2012, December 5, 2013 and December 5 2014, provided, however, before in options vest, the closing price of Conn's common stock must close at or above \$18 per share for at least 20 consecutive trading days.
- 3. Not a required reportable field. SEC software requires a dollar amount; use zeroes per SEC

/s/ Theodore M. Wright 12/06/2011

** 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.