FORM 4

obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL (OWNERSHIP
Section 16. Form 4 or Form 5		
obligations may continue Coo		

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>JACOBY JON E M</u>						2. Issuer Name and Ticker or Trading Symbol CONNS INC [CONN]									Relationshi eck all app X Direc	. ,		. ,	Issuer Owner	
(Last) 100 MOF SUITE 50		rst) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/28/2013								Office below	er (give tit v)	tle	Othe belo	er (specify w)		
						4. If Amendment, Date of Original Filed (Month/Day/Year) 04/01/2013									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) LITTLE	ROCK AF	R 7	2202		_											n filed by I		eporting Pe an One R		
(City)	(St	ate) (Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
			Date (Month/Day/Year)		Execution Date, r) if any				Disposed O	curities Acquired (A) or esed Of (D) (Instr. 3, 4 a			Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) o (D)	r Price	,	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)	
Common	Stock			03/28/2	2013				J ⁽¹⁾		832,222	D	\$	0	5,305,	D5,343 ⁽²⁾ I By SG- 1890, LLC				
Common	Stock			03/28/2	2013				J ⁽¹⁾		624,167	A	\$	0	687,1	687,145 ⁽³⁾ D				
Common	nmon Stock 03/28/2			2013)13			J ⁽¹⁾		208,055	A	\$	0	208,055 ⁽⁴⁾			I	By Coral Two Corporation		
		Та	ble II								osed of, convertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	n Date e (Month/Day/Year) i	Executi if any			ransaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exerc tion Da h/Day/\		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		3		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
						Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	or Numbe of Shares						

Explanation of Responses:

- 1. Effective March 28, 2013, SG-1890, LLC distributed a total of 832,222 shares to the reporting person and Coral Two Corporation, a corporation wholly owned by the reporting person, in connection with and in exchange for their ownership interests in SG-1890, LLC.
- 2. Represents total shares of Conn's, Inc. Common Stock held by SG-1890, LLC. The reporting person is a member of the Executive Committee of The Stephens Group, LLC, the Manager of SG-1890, LLC. The reporting person disclaims beneficial ownership of such shares except to the extent of his pecuniary interest therein. This line is added to Table I of the original report.
- 3. This line amends and replaces line 1 of Table I of the original report to reflect the corrected share amount owned directly by the reporting person.
- 4. This line amends and replaces line 2 of Table I of the original report to reflect the corrected share amount owned by the reporting person through Coral Two Corporation.

Ronald M. Clark, Attorney-in-06/25/2013 fact for reporting person

** 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.