FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

washington, D.C. 2004:

| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). | STATEMENT OF C |
|---|----------------|
| Name and Address of Benerting Person* | 2. Issuer N |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

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* LEE ROBERT B JR | | | | | | 2. Issuer Name and Ticker or Trading Symbol CONNS INC [CONN] | | | | | | | | neck all appl Direct | ctor | | 10% Ov | ner | |
|--|---|--|---|----------------------------------|--------------------------------------|--|---|--|--|------|------------------|---|--|-------------------------|--|---|--|---------------------------------------|--|
| (Last) 3295 CC | (Last) (First) (Middle) 3295 COLLEGE STREET | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/30/2004 | | | | | | | | Officer (give title below) Senior VP - | | Other (s below) vertising | specify | |
| (Street) BEAUM (City) | | tate) | | | | | | 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 Person | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | saction | ction 2A. Deemed Execution Date, | | | 3. Transa Code (I | ction | tr. 5) | | | 5. Amou Securiti Benefic | int of 6. O Formially (D) (I) (I) | | n: Direct r Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | 1 | | | | | | | | ispo | sed of | , or Ben | eficially | / Owned | and 4) | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, | 4. Transactic Code (Inst 8) | | | | 6. Date Exercisal Expiration Date (Month/Day/Year) | | | Amount o Securities Underlyin Derivative | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4) | e (Caracteristics) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisabl | | xpiration ate | Title | or Number of Shares | mber | | | | | |
| Employee Stock Option (right to | \$17.73 | 11/30/2004 | | | A | | 5,000 | | (1) | 1 | 1/30/2014 | Common Stock | 5,000 | \$0 ⁽²⁾ | 5,000 | | D | | |

Explanation of Responses:

- $1. \ The \ option \ vests \ in \ five \ equal \ annual \ installments \ beginning \ on \ November \ 30, \ 2006.$
- 2. Not a required reportable field. SEC software requires a dollar amount; use zeros per SEC.

<u>/s/ Robert B. Lee, Jr.</u> <u>03/31/2005</u>

Date

** Signature of Reporting Person

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.