FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
1								
Estimated average burden								
hours 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

Name and Address of Reporting Person* Fenton Thomas John					2. Issuer Name and Ticker or Trading Symbol CONNS INC CONN]									eck all applic	ationship of Reporting k all applicable) Director Officer (give title		10% Owner Other (specify	
(Last) 2445 TEC SUITE 80		st) (NY FOREST BLV	Middle) D.		3. Date of Earliest Transaction (Month/Day/Year) 02/01/2023 X Office (give tide below) Chief Credit Of								below)					
(Street) THE WOODLA	ANDS TX		381 Zip)		4. If	Line								$rac{\mathbf{X}}{\mathbf{X}}$ Form fi	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date				Day/Year) Executi		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)				5. Amour Securitie Beneficia Owned F Reported	Forn (D) o ollowing (I) (Ir		orm: Direct I) or Indirect I (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			(IIIəli. 4)	
Common Stock 02/01				/2023		F		1,679 ⁽¹⁾ D S		\$9.37	37,	37,503		D				
Common Stock 02/01			1/2023				Α		26,289 A		(3)	63,792			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
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	Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title ar of Securit Underlyir Derivative (Instr. 3 a	ties ig Security	Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	le V (A)		(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares					
Performance Stock Units	(4)	02/01/2023			A		26,288		02/01/20	026	02/01/2026	Common Stock	26,288	(4)	37,56	53	D	

Explanation of Responses:

- 1. Represents shares withheld to pay withholding taxes due upon vesting of Restricted Stock Units awarded on February 1, 2021 and February 1, 2022.
- 2. Price Based on closing price of Conn's, Inc. Common Stock on date of vesting.
- 3. Restricted Stock Units awarded to reporting person under the 2020 Omnibus Equity Plan. Each RSU represents a contingent right to receive one share of common stock. The RSUs vest in three annual installments commencing on February 1, 2024.
- 4. Performance-based Restricted Stock Units awarded to reporting person under the 2020 Omnibus Equity Plan. Each Performance-based Restricted Stock Unit represents a contingent right to receive a share of the Company's common stock, based on the Company's total shareholder return ("TSR").

Remarks:

/s/Mark Prior, as attorney in fact

02/03/2023

** 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.