FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPRO | DVAL | | | | |
|------------------------|---------------------------------------|--|--|--|--|
| OMB Number: | 3235-0287 | | | | |
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| | Check this box if no longer subject to |
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| ٦. | Section 16. Form 4 or Form 5 |
| J | obligations may continue. See |
| | Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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>STEPHENS HARRIET C</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol CONNS INC [CONN] | | | | | | | | | elationship o ck all applic Directo | able) | g Pers | on(s) to Issu 10% Ow | to Issuer 0% Owner |
|--|---|--|---|---|--------------------------------------|--|---|--------|-----------------------------------|---|--|---|--|--------------------|---|--|---|--|--|
| (Last) 111 CENT | , | rst) (I | | 3. Date of Earliest Transaction (Month/Day/Year) 12/03/2010 | | | | | | | | | | (give title | | Other (s below) | pecify | | |
| (Street) LITTLE F | | | 2201 Zip) | | 4. If <i>i</i> 11/2 | | | Date o | of Original | Filed | (Month/Da | Line) | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (3) | | | n-Deriv | ative | Se | curitie | s Ari | nuired | Dist | nosed o | of or F | ene | ficially | y Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Tran | | | | 2. Trans | action | ır) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | (A) or | 5. Amou Securitie Beneficia Owned F | nt of es ally following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | Code | v | Amount | (A) or (D) | | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common Stock 12/0 | | | | | 3/2010 | | X | | 136(1 | 136 ⁽¹⁾ A | | \$2.7 | 465 | | | I i | By LLC | | |
| Common Stock 12/ | | | | 12/03 | 3/2010 | | | | | | 175 ⁽¹ | 1) | A | \$2.7 | 599 | | I : | | By trust |
| | | Ţ | able II - | | | | | | | | sed of, onverti | | | | Owned | | | | |
| 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/D | n Date, | 4. Transactic Code (Inst 8) | | on of | | Expiratio | 6. Date Exercisa Expiration Date (Month/Day/Yea | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | expiration Date | Title | O N O | lumber | | | | | |
| Subscription Rights (right to buy) | \$2.7 | 12/03/2010 | | | X | | | 329 | 11/08/20 | 10 1 | 1/23/2010 | Comm | | 136(1) | \$0 | 0 | | I | By LLC |
| Subscription Rights (right | \$2.7 | 12/03/2010 | | | X | | | 424 | 11/08/20 | 10 1 | 1/23/2010 | Comm | | 175 ⁽¹⁾ | \$0 | 0 | | I | By Trust |

Explanation of Responses:

1. This amendment is filed to correct the transaction date of the two subscription rights exercises previously reported, and to correct the number of shares acquired upon the exercise of such rights.

Remarks:

Todd Ferguson, attorney in fact for reporting person 12/07/2010

** 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.