Edgar Filing: ATNIP DAVID R - Form 4

ATTNED DAVID I

Form 4											
December 03, FORM	4 UNITE	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								PPROVAL 3235-0287 January 31	
if no longe subject to Section 16 Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b).	r STATI Filed p sue. Section 1	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section							burden hou response	Expires: 2005 Estimated average burden hours per response 0.5	
(Print or Type Re	esponses)										
1. Name and Address of Reporting Person <u>*</u> ATNIP DAVID R			2. Issuer Name and Ticker or Trading Symbol CONNS INC [CONN]				g	5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3295 COLLEGE STREET			3. Date of Earliest Transaction (Month/Day/Year) 11/30/2012					(Check all applicable) <u>Director</u> 10% Owner <u>X</u> Officer (give title Other (specify below) Senior VP/Treasurer			
				Amendment, Date Original Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
(City)	(State)	(Zip)	T-11	I N. D				Person	6 D 6		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	Date 2A. Dee ear) Execution any		3. Transactio Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	ties (A) o of (D	or))	quired, Disposed o 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	f, or Beneficia 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	-	
Common Stock	11/30/2012			M	1,200	A	\$ 0 $\underline{(1)}$	115,100	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Shares
Restricted Stock Units	\$ 0 <u>(1)</u>	11/30/2012		М	1,200	11/30/2012	12/30/2012 <u>(2)</u>	Common Stock	1,200

Reporting Owners

Reporting Owner Name / Addre	ress Relationships						
	Director	10% Owner	Officer	Other			
ATNIP DAVID R 3295 COLLEGE STREET BEAUMONT, TX 77701			Senior VP/Treasurer				
Signatures							
/s/ David R. Atnip	12/03/2012						

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Each Restricted Stock Unit represents a contingent right to receive one share of Conn's, Inc. Common Stock. On November 30, 2012, (1) 1,600 of the reporting person's Restricted Stock Units vested, and 1,600 shares of Conn's, Inc. Common Stock were issued to the

- reporting individual.
- (2) The Restricted Stock Units convert to shares of Common Stock which are deemed to be issued, if not issued, thirty days following the vesting of the Restricted Stock Units. No expiration Date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

**Signature of

Reporting Person