FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OWNERSHIP

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				Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL	ON

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burden								

Instruction 1(b)

Form 3	3 Holdings Rep	orted.												Tiot	irs per re	sponse.		1.0
Form 4	1 Transactions	Reported.	Fil	led pursuant t or Sectio					rities Excha Company Ac									
1. Name and Address of Reporting Person* Moore Sean (Last) (First) (Middle) 690 E. LAMAR BLVD., STE. 400					2. Issuer Name and Ticker or Trading Symbol FIRST CASH FINANCIAL SERVICES INC [FCFS] 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2015						(Che	5. Relationship of Reporting Person(s) to Isst (Check all applicable) Director 10% Ow X Officer (give title below) SVP Store Development				Owne r (spe	er	
(Street) ARLINGTON TX 76011 (City) (State) (Zip)				4. If Amer	4. If Amendment, Date of Original Filed (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 Person													
		Tab	le I - Non-Deri	vative Sec	curiti	es A	cquire	ed, D	isposed (of, or	Benefi	ciall	y Owned	i				
			Execution I	Execution Date, Ti		Transaction Of (D) (In Code (Instr.			ies Acquired (A) or Dispos str. 3, 4 and 5)			5. Amount Securities Beneficial Owned at	s Owr Illy Forr		ership Inc n: Direct Be		Nature of direct eneficial vnership	
				(WOITHINDAY	ionui/Day/rear)		6)		Amount		Price		Issuer's Fiscal Year (Instr. 3 an 4)		Ìndirect (I)		(Instr. 4)	
Common	Stock											1,998(1)		D				
Common	Stock							730.06 ⁽²⁾		I	D							
		7	able II - Deriva (e.g., ¡	ative Secu puts, calls									Owned					•
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. Transaction Code (Instr. 8)	of Deriv	r osed) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)				nt of ities lying tive Secu 3 and 4)	urity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Owners Form: Direct (I or Indire (I) (Instr.	nip o B O) C ect (I	.1. Nature of Indirect Beneficial Ownership Instr. 4)
							Date Exercis	sable	Expiration Date	Title	or Nun of Sha							
Ontions ⁽³⁾	\$40						07/01/2	016 ⁽³⁾	12/31/2020	Comm	on 50	000		50 000		D		

Explanation of Responses:

- 1. Includes 600 shares of restricted stock awards granted in 2010. Vesting is time-based with 300 shares which vested on January 31, 2016 and 300 shares schedule to vest on January 31, 2017.
- 2. Shares held in the First Cash 401(k) Profit Sharing Plan as of December 31, 2015.
- 3. Vesting of these options is time-based with 20% of the award vesting on July 1, 2016, 20% of the award vesting on July 1, 2017, 20% of the award vesting on July 1, 2018, 20% of the award vesting of the award vesting on July 1, 2018, 20% of the award vesting of the award vesting

1, 2019 and 20% of the ward vesting on July 1, 2020. Shares reported are the remaining unvested and/or unexcercised option awards.

Remarks:

/s/ Sean D. Moore 02/16/2016

** 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.