Instruction 1(b).

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FORM 4

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

Washington, D.C. 20549 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

1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execut urity or Exercise (Month/Day/Year) if any		ned 4. Transactio Code (Inst Day/Year) 8)			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	t (Instr. 4)			
			Tal					ies Acqu varrants,							d			
Common Stock 02/27/2						2024			F		2,374	D	\$72.	63 11	7,740	D		
							Code	v	Amount	(A) or (D)	Price	Transa	ed ction(s) 3 and 4)		(Instr. 4)			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						tion 2A. Deemed Execution Date,		3. Transaction Code (Instr. 5)		ies Acquired (A) c Of (D) (Instr. 3, 4		or 5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
			Table	I - No	n-Deriva	tive S	ecui	ities Acq	uired,	Dis	posed of	, or Be	nefici	ally Own	ed			
(2)			heck th	b5-1(c) his box to indic	cate that	a trans	action was m	ade pursua	ant to a	contract, instr uction 10.	uction or writ	ten plan that is in	tended to					
(City) (State) (Zip)					Form filed by More than One Reporting Person										porting			
(Street) LOUISVILLE KY 40269					T. II Americinent, Date of Original Fried (wonth/Ddy/Tear)								ne)					
P. O. BOX 99900						4. If Amendment, Date of Original Filed (Month/Day/Year)						6	President and CEO 6. Individual or Joint/Group Filing (Check Applicable					
(Last)	_ast) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)						-	X Officer (give title below)		Other below	(specify)	
Lynch Robert						PAPA JOHNS INTERNATIONAL INC [PZZA]						(C	heck all app X Direc	,	10%	Owner		
1. Name and Address of Reporting Person*							or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer				

Explanation of Responses:

Debra Tate Johnson, by Power 02/29/2024

of Attorney

Title

** Signature of Reporting Person Date

Amount or Number

of Shares

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).

v

Code

(A) (D)

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.

Date Exercisable Expiration Date