FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPRO

OMB Number:	3235-0287
Estimated average burden	
hours nor response:	0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

of Reporting Person*		2. Issuer Name and Ticker or Trading Symbol PAPA JOHNS INTERNATIONAL INC [PZZA]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
ACK A		, ,	X	Director	10% Owner						
				Officer (give title	Other (specify						
(Last) (First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year)		below)	below)						
		12/31/2004									
		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	vidual or Joint/Group Filing (Check Applicable Line)							
KY	40269		X	Form filed by One Reporting	Person						
				Form filed by More than One	Reporting Person						
(State)	(Zip)										
	(First) KY	(First) (Middle) KY 40269	PAPA JOHNS INTERNATIONAL INC [PZZA] (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2004 4. If Amendment, Date of Original Filed (Month/Day/Year)	PAPA JOHNS INTERNATIONAL INC [PZZA] (Check X 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2004 4. If Amendment, Date of Original Filed (Month/Day/Year) X 6. Indivi	PAPA JOHNS INTERNATIONAL INC [PZZA] (Check all applicable) X Director Officer (give title below) 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2004 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Che X Form filed by One Reporting Form filed by More than One						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities	Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	3 and 4)		(Instr. 4)	

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. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (li 8)				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 of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Phantom stock	(1)	12/31/2004		A		21.78		(2)	(2)	Common stock	21.78	\$34.44	282.41	D	

Explanation of Responses:

- 1. Converts to common stock on a one-for-one basis
- 2. The shares of phantom stock become payable in cash in a lump sum or in installments upon termination of service as a director, or earlier in accordance with certain in-service elections available under a deferred compensation plan.

Kenneth M. Cox, by power of attorney

01/04/2005

** 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.