## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
1. Name and Address of Reporting Person <sup>*</sup> Kraut Robert C.

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 <sup>®</sup> <u>Kraut Robert C.</u>			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>PAPA JOHNS INTERNATIONAL INC</u> [ PZZA ]		tionship of Reporting Pers all applicable) Director	on(s) to Issuer 10% Owner		
(Last) P. O. BOX 99900	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/22/2015	x	Officer (give title below) SVP, Chief Mark	Other (specify below) eting Officer		
Street) LOUISVILLE (City)	KY (State)	40269 (Zip)	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				

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Ad Disposed Of (D			Securities Beneficially Owned Following Reported	Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	<ul> <li>Transaction(s) (Instr. 3 and 4)</li> </ul>		(Instr. 4)
Common Stock	05/22/2015		Α		1.6358	Α	\$68.24	7,696.9572	D	

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)		5. Num Derivat Securit Acquire or Disp (D) (Ins and 5)	ive ies ed (A) osed of	6. Date Exerc Expiration Da (Month/Day/N	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		

Explanation of Responses:

Debra A. Breeden, by power of

attorney

<u>05/26/2015</u>

\*\* 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.

OMB APPROVAL