FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

| OMB Number: | 3235-0104 |
|--------------------------|-----------|
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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Clark Amanda | | | 2. Date of Event Requiring Statement (Month/Day/Year) 02/17/2020 | 3. Issuer Name and Ticker or Trading Symbol PAPA JOHNS INTERNATIONAL INC PARA | | | | ZZA] | | |
|--|------------|----------------|--|--|--|---------------------------------------|--|--|--|--|
| (Last) P. O. BOX 9990 | (First) | (Middle) | | | ionship of Reporting Person(s) all applicable) Director Officer (give title below) | 10% Owner Other (specify below) | | nendment, Date of Original Filed /Day/Year) | | |
| (Street) LOUISVILLE (City) | KY (State) | 40269 (Zip) | | | Chief Development | Officer | | ridual or Joint/Group Filing (Check able Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | |

Table I - Non-Derivative Securities Beneficially Owned

| Indirect (I) (Instr. 5) | 1. Title of Security (Instr. 4) | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|-------------------------|---------------------------------|--|--|---|
|-------------------------|---------------------------------|--|--|---|

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

| | 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | | Conversion or Exercise | Form: Direct (D) or | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|--|--|--|-------|---|---|------------------------|------------------------|---|
| | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | Price of Derivative Security Indirect (I) | | | |

Explanation of Responses:

No securities are beneficially owned.

<u>Debra Tate Johnson, by Power of Attorney</u>

02/18/2020

** 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 5 (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.