FORM 4

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 | | | | | | | |

| Check this box if Section 16. Form obligations may c Instruction 1(b). | | STATEME File | OMB Number Estimated aver hours per res | erage burden | | |
|---|--|-----------------|---|--------------------------|--|--|
| | | | or Section 30(h) of the Investment Company Act of 1940 | | | |
| 1. Name and Addres <u>LAUGHERY</u> | s of Reporting Person [*] JACK A | | 2. Issuer Name and Ticker or Trading Symbol PAPA JOHNS INTERNATIONAL INC [PZZA] | (Check all ap | ip of Reporting Perso plicable) ector cer (give title | on(s) to Issuer 10% Owner Other (specify |
| (Last) P.O. BOX 99900 | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 05/10/2006 | belo | ow) | below) |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual (Line) | or Joint/Group Filing | (Check Applicable |
| LOUISVILLE | KY | 40269 | | X For | m filed by One Repo | ting Person |
| (City) | (State) | (Zip) | | | m filed by More than son | One Reporting |

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) | | | 4. Securities A Disposed Of (| | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|------|---|----------------------------------|----------------------------|---------|---|---|---|
| | | | Code | v | Amount | Amount (A) or (D) Price | | Transaction(s) (Instr. 3 and 4) | | |
| Common Stock | 05/10/2006 | | М | | 27,000 | A | \$16.25 | 32,000 | D | |
| Common Stock | 05/10/2006 | | S | | 27,000 | D | \$34.18 | 5,000 ⁽¹⁾ | 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. Transa Code (8) | | Derivative | | 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 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) | | |
| Option to buy ⁽²⁾ | \$16.25 ⁽¹⁾ | 05/10/2006 | | М | | | 27,000 ⁽¹⁾ | (3) | 06/07/2006 | Common stock | 27,000 ⁽¹⁾ | \$0 | 0 | D | |

Explanation of Responses:

1. Adjusted to reflect two-for-one stock split effected January 13, 2006

2. Option to buy under Papa John's International, Inc. 1993 Stock Option Plan for Non-Employee Directors

3. The option became fully exercisable on June 7, 1999.

/s/ Kenneth M. Cox, by power of attorney

05/12/2006

Date

** Signature of Reporting Person

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.