SEC 2	Form 4
-------	--------

FORM 4

Section 16. Form 4 or Form 5

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APP	ROVAL
MB Number:	3235-0287

0 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Estimated average burden hours per response:

 obligations may continue. See Instruction 1(b). 			iled pursuant to Section 16(a) of the Securities Exchange Act of 1934	hours pe	s per response: 0.5				
			or Section 30(h) of the Investment Company Act of 1940	(h) of the investment Company Act of 1940 e and Ticker or Trading Symbol (LY CORP [PBPB] iest Transaction (Month/Day/Year) 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner Officer (give title below) Other (specify below)					
1. Name and Addre	ss of Reporting Perso <u>NT L</u>	on*	2. Issuer Name and Ticker or Trading Symbol POTBELLY CORP [PBPB]	(Check	all applicable				
			_			o titlo	21		
(Last) C/O POTBELLY	(First) Y CORPORATIO	(Middle) N	3. Date of Earliest Transaction (Month/Day/Year) 10/09/2013	1					,
222 MERCHAN	NDISE MART PL	AZA, 23RD							
FLOOR			4. If Amendment, Date of Original Filed (Month/Day/Year)		dual or Joint	/Group Fi	oup Filing (Check Applicable		
(Street)			-	X	Form filed by One Reporting Person				
CHICAGO IL 60654							han O	One Reporting	
(City)	(State)	(Zip)							

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)	3. Transa Code (8)		Disposed Of (D) (Instr. 3, 4 and 5)			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	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150. 4)	
Common Stock	10/09/2013		С		100,000	Α	(1)	1,037,971	D		
Common Stock	10/09/2013		С		12,500	Α	(2)	1,050,471	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)		Deri Sec Acq or D of (I	umber of vative urities uired (A) visposed D) (Instr. and 5)			e of Securities		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	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		(Instr. 4)		
Series A Preferred Stock	\$0 ⁽¹⁾	10/09/2013		С			100,000	09/19/2001	(1)	Common Stock	100,000	\$0	0	D	
Series F Preferred Stock	\$0 ⁽²⁾	10/09/2013		С			12,500	12/24/2008	(2)	Common Stock	12,500	\$0	0	D	

Explanation of Responses:

1. The Series A Preferred Stock automatically converted into Potbelly Corporation ("Potbelly") common stock on a 1-to-1 basis upon the closing of Potbelly's initial public offering and did not have an expiration date.

2. The Series F Preferred Stock automatically converted into Potbelly common stock on a 1-to-1 basis upon the closing of Potbelly's initial public offering and did not have an expiration date.

/s/Matthew J. Revord, Attorney-10/11/2013

in-fact

** 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.