FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, [| D.C. 20549 |
|---------------|------------|
|---------------|------------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-------|--|--|--|--|--|--|--|--|--|
| OMB Number: 3235-028 | | | | | | | | | | |
| 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).

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* Head David W | | | | 2. Issuer Name and Ticker or Trading Symbol POTBELLY CORP [PBPB] | | | | | | | | | ck all app | , | ng Pers | son(s) to Is | | | | |
|--|---|---------|--------------|---|---|---|---|--|---------------------|--|--|----------------------------|--|--|---------------------------|---|--|---|------------|--|
| (Last) | (Fir | est) (M | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/15/2024 | | | | | | | | | Office below | er (give title | | Other (s below) | specify | |
| 111 N. CANAL SUITE 325 | | | | 4. If <i>F</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line) | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | | |
| (Street) CHICAGO IL 60606 | | | | | | | | | | | | 2 | Form filed by More than One Reporting Person | | | | | | | |
| (City) | (St | ate) (Z | <u>Z</u> ip) | | Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | nded to | | | | | | |
| | | Table | I - Nor | n-Deriva | tive S | Secu | rities | s Acq | uired, | Dis | posed of | , or E | Bene | ficial | ly Own | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Date) | | | | | Executi | | Deemed cution Date, ny nth/Day/Year) | | | | es Acquired (A) Of (D) (Instr. 3, 4 | | | Benefic | ies ially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or F | Price | Transa | ction(s) 3 and 4) | | | (Instr. 4) | |
| Common Stock 05/15/2 | | | | | 2024 | | | A ⁽¹⁾ | | 11,389 | | \ | \$ <mark>0</mark> | 137,961 | | | 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) | ivative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any | | | 4. Transaction Code (Instr. 8) | | of I | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) | | D S (I | Price of erivative ecurity nstr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | y [| 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 | Amount or Number of Shares | | ber | | | | | | |

Explanation of Responses:

1. Represents an award of restricted stock units. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock. These restricted stock units vest on May 15, 2025.

Remarks:

/s/ David Head

05/21/2024

** 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.