FORM 3

19605 NE 8TH STREET

## 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

			UI Secti	011 30(11) 01	the investment company Act	01 1340					
1. Name and Address of Reporting Person*  Nierenberg Investment  Management Company, Inc.			2. Date of E Requiring S (Month/Day 08/02/202	Statement //Year)	3. Issuer Name and Ticker or Trading Symbol POTBELLY CORP [ PBPB ]						
(Last)	(First)	(Middle)	=		Relationship of Reporting Issuer (Check all applicable)	Person(s	) to		If Amendment, Date of Original Filed (Month/Day/Year)      Individual or Joint/Group Filing		
19605 NE 8		(	_		Director Officer (give title below)	_	(specify		eck Applicable		
(Street) CAMAS	WA	98607				,		V	Person	by More than One	
(City)	(State)	(Zip)									
		Ta	able I - Non	-Derivat	tive Securities Benefic	cially O	wned				
1. Title of Sec	curity (Instr. 4)				2. Amount of Securities Beneficially Owned (Instr. 4)	3. Owner Form: I (D) or II (I) (Inst	Direct ndirect		iture of Indire ership (Instr.		
Common St	ock <sup>(1)(2)</sup>				865,001	]	[	By I	D3 Family F	und, L.P. <sup>(3)</sup>	
Common St	ock <sup>(1)(2)</sup>				1,520,943	]	[	By I	O3 Family B	fulldog Fund, L.P.	
Common St	cock <sup>(1)(2)</sup>				94,720	]	[	By I	Haredale Ltd	1.(3)	
Common St	cock <sup>(1)(2)</sup>				425,555	]	[	By Benedict Value Fund, L.P.(5		ue Fund, L.P.(3)	
Common St	ock <sup>(1)(4)</sup>				94,398	I	D				
		(e.g			e Securities Beneficia ants, options, converti			)			
1. Title of Derivative Security (Instr. 4)  2. Date Exercisab Expiration Date (Month/Day/Year)			ate	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		Conver or Exer		5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr.		
			Date Exercisable	Expiratio Date	n Title	Amount or Number of Shares	Price of Direct (D) or Indirect (Security (I) (Instr. 5)		5)		
		porting Person* nent Manage	<u>ement</u>	_							
(Last) 19605 NE 8	(First)	(Mi	ddle)								
(Street) CAMAS	WA	980	607								
(City)	(State)	(Zip	o)								
1. Name and A Nierenbe	Address of Rep	porting Person*									
	(First)		ddle)	_							

(Street) CAMAS	WA	98607	
(City)	(State)	(Zip)	

## **Explanation of Responses:**

- 1. This Form 3 is filed jointly by Nierenberg Investment Management Company, Inc. and David Nierenberg.
- 2. Each of the Reporting Persons disclaims beneficial ownership of the securities reported herein except to the extent of his or its pecuniary interest therein. The filing of this Form 3 shall not be deemed an admission that the Reporting Persons are, for purposes of Section 13(d) of the Securities Exchange Act of 1934, as amended, the beneficial owners of any securities of the Issuer he or it does not directly own.
- 3. Nierenberg Investment Management Company ("NIMCO") is the sole general partner of The D3 Family Fund, LP, The D3 Family Bulldog Fund, LP, and the Benedict Value Fund, LP and the sole investment manager of Haredale Ltd. (collectively, the "Funds"). Mr. Nierenberg is the president of NIMCO. By virtue of these relationships, each of the Reporting Persons may be deemed to beneficially own the securities owned directly by the Funds.
- 4. The shares are owned solely by David Nierenberg.

NIERENBERG INVESTMENT

COMPANY, INC. By: /s/ 08/07/2024

David Nierenberg Name:

<u>David Nierenberg Title:</u>

**President** 

/s/ David Nierenberg
DAVID NIERENBERG

08/07/2024

\*\* 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 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.