SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response: 0.5

OMB Number:

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

1. Name and Address of Reporting Person [*] Walsh Patrick James			2. Date of E Requiring Si (Month/Day)	tatement 'Year)	3. Issuer Name and Ticker or Trading Symbol POTBELLY CORP [PBPB]						
(Last) 111 N. CAN SUITE 325	(First) AL	(Middle)	04/24/2023		4. Relationship of Report Issuer (Check all applicable) Director X Officer (give title below)		10% Owner Other (specify below)		5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) CHICAGO (City)	IL (State)	60606 (Zip)				Chief People	Unicer		A Person	: Line) by One Reporting by More than One	
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)				6	2. Amount of Securities Beneficially Owned (Instr. 4)				I. Nature of Indirect Beneficial Dwnership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned(e.g., puts, calls, warrants, options, convertible securities)											
			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Se Underlying Derivative Se (Instr. 4)		curity Conversion Conversio Conversion Conversion Conve		e Form:	Ownership (Instr.	
			Date Exercisable	Expiratior Date	Title		Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)	

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Patrick James Walsh

06/20/2023

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 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.

** Signature of Reporting

Date