FORM 3

1850 SECOND STREET, SUITE 201

 IL

60035

(Street) HIGHLAND

PARK

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden r response: 0.5

				·	200111120				hours per	er response:	0.5
					6(a) of the Securities Exchange Athe Investment Company Act of 1						_
1. Name and Address of Reporting Person* WI-POTBELLY LLC			2. Date of Event Requiring Statement (Month/Day/Year) 10/03/2013		3. Issuer Name and Ticker or Trading Symbol POTBELLY CORP [PBPB]						
l ` ′	rst) (Middle) TREET, SUITE 201		0/03/2013		4. Relationship of Reporting Pers (Check all applicable) Director X Officer (give title	. ,	er		/Day/Year)	ate of Original File	∍d
(Street) HIGHLAND PARK	60035				below)	below)	,		ble Line) Form filed b	t/Group Filing (Ch by One Reporting by More than One Person	Person
(City) (St	tate) (Zip)										
		Т	able I - Nor		ve Securities Beneficial	1					
1. Title of Security (I	nstr. 4)				Amount of Securities eneficially Owned (Instr. 4)	3. Ownersh Form: Dire or Indirect (Instr. 5)	cṫ (D) (4. Natur (Instr. 5)		t Beneficial Owne	∍rship
Common Stock					72,485(1)	D					
		(e.g			e Securities Beneficially nts, options, convertible		s)				
1. Title of Derivative	Security (Instr. 4)		2. Date Exerc Expiration D (Month/Day/	ate	3. Title and Amount of Secur Underlying Derivative Securi		4. Convers	cise F	Ownership Form:	6. Nature of Ind Beneficial Own (Instr. 5)	
			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivati Security	ive o	Direct (D) or Indirect I) (Instr. 5)		
1. Name and Address WI-POTBELL	s of Reporting Person* LY LLC					·		•			
(Last) 1850 SECOND S	(First) TREET, SUITE 201	(Middle)									
(Street) HIGHLAND PARK	IL	60035									
(City)	(State)	(Zip)									
1. Name and Address Winchester Pa	of Reporting Person* rtners, L.P.										
(Last) 1850 SECOND S	(First) TREET, SUITE 201	(Middle)									
(Street) HIGHLAND PARK	IL	60035									
(City)	(State)	(Zip)									
1. Name and Address Sandburg Part	of Reporting Person*										
(Last)	(First)	(Middle)									

(City)	(State)	(Zip)					
	ss of Reporting Person*						
- vavetanu mv	estillents 1, LLC						
(Last)	(First)	(Middle)					
1850 SECOND STREET, SUITE 201							
(Street)							
HIGHLAND PARK	IL	60035					
(City)	(State)	(Zip)					

Explanation of Responses:

1. This amendment is being filed to properly place the signature of the person executing the original Form 3 on record. The holding in this line item is not new or revised but is being reported again solely to gain access to the filing system.

/s/Dennis Zaslavsky,
authorized person

** 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.