FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average be	urden								
hours per response:	0.5								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	e conditions of																		
1. Name and Address of Reporting Person* GOLDMAN JAMES A					2. Issuer Name and Ticker or Trading Symbol DOMINOS PIZZA INC [DPZ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) (First) (Middle) C/O DOMINO'S PIZZA					3. Date of Earliest Transaction (Month/Day/Year) 11/04/2024								Officer (give title Other (spec below) below)				(specify		
30 FRANK LLOYD WRIGHT DRIVE						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) ANN ARBOR MI 48105						Line) Form filed by One Reporting Per Form filed by More than One Reperson													
(City)	(S	tate) (Zip)																
		Table	l - No	on-Deriva	tive S	Secu	rities	Acc	uired	l, Dis	posed of	, or E	enefici	ally Own	ed				
Date				2. Transact Date (Month/Day	Execution Date,				es Acquired (A) or Of (D) (Instr. 3, 4 ar				6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A) o	Price	Transac (Instr. 3	tion(s)			instr. 4)	
Common	Stock, \$0.	01 par value		11/04/2	024				S		531	D	\$430) 3	85		D		
Common Stock, \$0.01 par value														5,	748		I I	James Alan Goldman Revocable Trust	
		Та	ble II								osed of, convertib				d				
Derivative Conversion D		(Month/Day/Year) if any				5. Number of		6. Date Exercisa Expiration Date (Month/Day/Year		isable and 7. Title and Amount of		e and nt of ities lying ative ity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

/s/ Kevin S. Morris, attorney-

11/05/2024

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.