Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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STATEMENT O	F CHANGES IN	I BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response	9: 0.5								

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* GARRIDO FRANK					2. Issuer Name and Ticker or Trading Symbol DOMINOS PIZZA INC [DPZ]								(Check all appl Direct		tor		10% Ov	wner	
(Last) 30 FRAN	(Fir	est) (ř) WRIGHT DRI	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/24/2024								X	X Officer (give title below) Other (special below) EVP, Chief Restaurant Officer					
(Street) ANN ARBOR MI 48105 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
					$ _{\Box}$	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.													
		Table	I - No	n-Deriva	tive S	Secu	rities	Acc	quired	, Dis	posed of	, or E	Benefic	cially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					Execution Date		ate,	Transaction D		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securi		cially I Following	Forr (D) (Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) c (D)	Price	Tra		action(s) . 3 and 4)		(111511. 4)	
Common	Stock, \$0.0	1 par value Hol	ding	01/24/2	024			A		285(1)	A	. \$	\$0 6,0)22.764		D		
Common Stock, \$0.01 par value Holding 01/24/20					024			F		97(2)	D	\$42	1.77	5,925.7		25.764			
	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)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year		4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) o Dispo of (D) (Instrand 5	rities lired r osed) 1. 3, 4	6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	Code V (A) (D)			Date Exercis	sable	or Num Expiration of		or Numbe						

Explanation of Responses:

- 1. Represents the number of shares earned upon vesting of performance-based restricted stock units ("PSUs") granted to the reporting person in 2021; number of shares earned is based on the Compensation Committee's certification of the Company's performance achieved during the three-year performance period ended December 31, 2023 under the terms of the PSU awards.
- 2. Represents shares withheld to satisfy tax withholding obligations upon the January 24, 2024 PSU vesting described in footnote 1 above.

/s/ Kevin S. Morris, attorneyin-fact

01/26/2024

** 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.