FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.	C. 20549
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 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* <u>LAWRENCE JEFFREY D</u>						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 X Officer (give title Other (specify						
(Last) (First) (Middle) 30 FRANK LLOYD WRIGHT DR						3. Date of Earliest Transaction (Month/Day/Year) 12/23/2020									Former CFO						
(Street) ANN ARBOR MI 48105					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City) (State) (Zip)																Person					
		Tab	le I - N	lon-Deri	vativ	e Sec	uriti	es A	cquir	ed, C)isposed	of, or B	enefic	ially	Owned	l					
1. Title of Security (Instr. 3)		[2. Transaction Date (Month/Day/Yea		Execution Date,		·	3. Transaction Code (Instr. 8)				(A) or 3, 4 and 5	5)	5. Amount of Securities Beneficially Owned Followin		Form:	Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D) Price			Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	ommon Stock, \$0.01 par value 12/23/20			12/23/20)20	.0			M		2,630	A	\$73.0)4	4 3,416.6		D				
Common	nmon Stock, \$0.01 par value 12/23/202)20	0			S		2,630	D	\$403.57	572 ⁽¹⁾ 786		.694 D		D				
Common	Stock, \$0.0	1 par value	12/23/2020			0			M		2,060	A	\$118.	54	2,846.694		D				
Common Stock, \$0.01 par value			12/23/2020		s 2,060 D \$		\$403.48	482 ⁽²⁾ 786.694		694	D										
Common Stock, \$0.01 par value													8,70)2.963		I	D. Lawrence and Patricia M. Lawrence, T'ees u/t/d 5/11/18			
		T	able II	l - Deriva	ative	Secu	rities	s Acc	quire	d, Di	sposed of s, convert	, or Be	neficia	lly (Owned						
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exe Expiration I (Month/Day		cisable and	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8 D S	. Price of Perivative Security Instr. 5)	9. Numb derivativ Securitie Beneficie Owned Followin Reported Transact (Instr. 4)	re es ally g d tion(s)	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)		
						v	/ (A) (D)		Date Exercisable		Expiration Date	Title	Amous or Number of Shares	er							
Option to Purchase Common Stock	\$73.04	12/23/2020				1 2,63		2,630	07/16/2018		07/16/2024	Commo Stock, \$0.01 pa value	2 63	0	\$0.00	0		D			
Option to Purchase Common Stock	\$118.54	12/23/2020			M			2,060	07/1:	5/2019	07/15/2025	Common Stock, \$0.01 pa value	2.06	0	\$0.00	0		D			

Explanation of Responses:

- 1. This transaction was executed in multiple trades at prices ranging from \$403.47 to \$403.59. The price reported above reflects the weighted average sale price.
- 2. This transaction was executed in multiple trades at prices ranging from \$403.40 to \$403.52 The price reported above reflects the weighted average sale price.

Remarks:

/s/ Kevin S. Morris, attorneyin-fact

12/28/2020

** 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.