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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	ide. dee		Filed	pursua or Se	ection 3	ection 80(h) o	16(a) f the Ir	of the S vestme	ecuriti nt Cor	es Exchang npany Act o	e Act of f 1940	1934			llours	perre	esponse:	0.5
Name and Address of Reporting Person* Taylor Shawn A				2. Issuer Name and Ticker or Trading Symbol NOODLES & Co [NDLS]									Check a		icable)	ng Pe	rson(s) to Is		
(Last) (First) (Middle) 520 ZANG ST., UNIT D					3. Date of Earliest Transaction (Month/Day/Year) 03/02/2022										Office below	fficer (give title elow)		Other (below)	specify
(Street) BROOM (City)	FIELD CO		0021 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								ine) X	,				
		Table	I - Nor	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or B	enefic	ially (Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Exec ay/Year) if an		Deemed ecution Date, ny onth/Day/Year)		3. 4. Securitie Disposed (5) 5)					, 4 and Secur Benet Owne		ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	Price			action(s) 3 and 4)			(Instr. 4)
Class A Common Stock 03/02/2					/2022			P		1,511	A \$.66	18,291			D		
		Tal									osed of, o				wned	i			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	onversion Date Execution Date, if any incle of erivative Exects		on Date,	4. Transaction Code (Instr. 8)		of	ired r osed) : 3, 4	Expirati (Month/ ities red sed 3, 4			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		ınt Der				10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

Remarks:

/s/ Melissa Heidman, attorney in fact

03/03/2022

** 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.