FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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	Check this box if no longer subject to
١	Section 16. Form 4 or Form 5
	obligations may continue. See
	Instruction 1(h)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

								,														
Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol BUILD A BEAR WORKSHOP INC BBW										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
John St	<u>ıaron Pric</u>	<u>:e</u>				DOILD A BEAK WORKSHOP INC [BBW									X	Direc	,		10% C	wner		
(Last) (First) (Middle)						1										X	Officer (give title below)			Other (specify below)		
, ,	,	,	•			3. Date of Earliest Transaction (Month/Day/Year)										President and CEO						
C/O BUILD-A-BEAR WORKSHOP, INC.					03/	03/31/2019																
1954 INNERBELT BUSINESS CENTER DR.					\vdash																	
					- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) ST. LOU	IS M	0 6	53114													X	Forn	n filed by On	e Rep	orting Pers	on	
31. LOO	10 101	0	33114														Form filed by More than One Reporting					
(O:t-)	(0)	-+->	7:>														Pers	on				
(City)	(51	ate) (Zip)																			
		Tabl	e I - Nor	n-Deriv	ative	Se	ecuriti	es Ac	quire	d, Di	spo	sed o	f, oı	r Bene	efici	ally	Owne	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Day/Year) if a		Executi if any	A. Deemed xecution Date, any //onth/Day/Year)		Transaction Dispose Code (Instr. 5)		isposed	ities Acquired (A d Of (D) (Instr. 3,			4 and Secu Bene		cially I Following	Forn (D) c	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Cod	de V	A	mount	(A) or (D) Pri		Price	Trans		saction(s) 3 and 4)			(Instr. 4)	
Common Stock 03/31/)						8,405	(1) D S		\$6	6.1 258,066 ⁽²		8,066(2)		D		
		Та	ıble II - C	Derivat e.g., pi													wned					
		1	''	e.g., p	uts, t	ans	s, wai	iaiiis,	•						iesj							
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Tr. Security or Exercise (Month/Day/Year) if any Co				4. Transa Code (8)		n of r. Der Sec Acc (A) Dis of (I	of I		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	Deri Seci	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	, (I (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	isable		oiration e	Amo or Num of Title Shar		nber	1						

Explanation of Responses:

- 1. Shares surrendered in payment of tax withholding due upon vesting of restricted stock.
- 2. After giving effect to the transactions reported in this Form 4, Ms. John directly owns 167,318 shares of common stock and 90,748 shares of restricted stock of Build-A-Bear Workshop, Inc. In addition, Ms. John holds vested options to purchase 357,530 shares and unvested options to purchase 64,425 shares of Build-A-Bear Workshop, Inc.'s common stock.

Remarks:

/s/ Sharon Price John

04/02/2019

** 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.