

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL	
OMB Number:	3235-0104
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>FS Capital Partners V, LLC</u> <hr/> (Last) (First) (Middle) 11100 SANTA MONICA BOULEVARD, SUITE 1900 <hr/> (Street) LOS ANGELES CA 90025 <hr/> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 08/31/2022	3. Issuer Name and Ticker or Trading Symbol <u>El Pollo Loco Holdings, Inc. [ LOCO ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	5,461,251 <sup>(1)</sup>	I	See Notes <sup>(2)(4)</sup>
Common Stock	73,052 <sup>(1)</sup>	I	See Notes <sup>(3)(4)</sup>

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Instr. 4)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

1. Name and Address of Reporting Person* <u>FS Capital Partners V, LLC</u> <hr/> (Last) (First) (Middle) 11100 SANTA MONICA BOULEVARD, SUITE 1900 <hr/> (Street) LOS ANGELES CA 90025 <hr/> (City) (State) (Zip)		
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1. Name and Address of Reporting Person* <u>FS EQUITY PARTNERS V LP</u> <hr/> (Last) (First) (Middle) 11100 SANTA MONICA BOULEVARD, SUITE 1900 <hr/> (Street) LOS ANGELES CA 90025 <hr/> (City) (State) (Zip)		
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1. Name and Address of Reporting Person\*

FS AFFILIATES V, L.P.

(Last) (First) (Middle)

11100 SANTA MONICA  
BOULEVARD, SUITE 1900

(Street)

LOS ANGELES CA 90025

(City) (State) (Zip)

**Explanation of Responses:**

1. Received in a pro rata distribution-in-kind from Trimaran Pollo Partners, L.L.C.
2. Held directly by FS Equity Partners V, L.P. ("Equity Partners V"). The general partner of Equity Partners V is FS Capital Partners V, LLC (the "General Partner").
3. Held directly by FS Affiliates V, L.P. ("Affiliates V"). The general partner of Affiliates V is the General Partner.
4. Mr. John M. Roth is a director of the Issuer, a managing member of the General Partner and chief executive officer of certain entities affiliated with Equity Partners V, Affiliates V and the General Partner. Mr. Roth disclaims beneficial ownership of the securities held by Equity Partners V and Affiliates V, except to the extent of his pecuniary interest therein.

**Remarks:**

/s/ John M. Roth

09/02/2022

\*\* 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 5 (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.**