FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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OMB API	PROVAL
OMB Number:	3235-0287
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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative

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

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

	e conditions of ee Instruction																		
1. Name and Address of Reporting Person* LaRose Brian					Pet	2. Issuer Name and Ticker or Trading Symbol Petco Health & Wellness Company, Inc. [WOOF]								(Check	k all app Direc	licable)	Ü	erson(s) to Is 10% O	
(Last) (First) (Middle)						,								1	belov	v) ``		below)	
C/O PETCO HEALTH AND WELLNESS COMPANY,				3. Date of Earliest Transaction (Month/Day/Year) 10/10/2024										(Chief Fina	nciai	Officer		
INC., 10	850 VIA F	RONTERA			4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line) Form filed by One Reporting Person					
SAN DII	EGO CA	A 9	92127												Form filed by More than One Reporting Person				
(City)	(St	tate) (Zip)																
		Table	l - No	n-Deriva	ative \$	Secu	rities	Acq	uired,	Dis	posed of	, or B	enefi	cially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Da		Date,	3. Transaction Code (Instr. 8)					, 4 and Securi Benefi Owned		cially Following	Forn (D) o	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) (D)	or Pric	се	Report Transa (Instr. 3	saction(s) 3 and 4)			(Instr. 4)		
Class A Common Stock 10/10/2				2024			F		3,899(1)	D	\$5	5.37	715	5,940(2)		D			
Class A Common Stock															3	,000		I	By spouse
		Та	ble II -								osed of, o				Owne	d			
Security or Exercise (Month/Day/Year) if any			Executi if any	ion Date, Trans		action (Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)	
				Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amoun or Numbe of Shares	r						

Explanation of Responses:

- 1. The transaction reported reflects the withholding of restricted stock units ("RSUs") in satisfaction of the Reporting Person's tax liability. The RSUs were granted to the Reporting Person on April 10, 2023 pursuant to the Petco Health and Wellness Company, Inc. 2021 Equity Incentive Plan (as amended, the "2021 Plan"), and a portion vested on October 10, 2024.
- 2. Includes 584,284 outstanding RSUs granted under the 2021 Plan. Each RSU represents the right to receive one share of Class A Common Stock.

/s/ Giovanni Insana, as 10/11/2024 Attorney-in-Fact

** Signature of Reporting Person

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.