| SEC Form 4<br>FOR  | M 4         |            | D STAT                                     | ES S                  | SECURITIE  | S AN                                    | DE                    | XCHAN                              | GE C   | OMMIS      | SSION  |    |   |   |  |
|--|-------------|------------|--|-----------------------|--|---|-----------------------|------------------------------------|--|------------|--|----|---|---|--|
| _  |             |            | Washing                                    | 205 .                 |  | OMB APPROVAL                            |                       |                                    |  |            |  |    |   |   |  |
| Check this box if no longer subject<br>to Section 16. Form 4 or Form 5<br>obligations may continue. See<br>Instruction 1(b).         |             |            |  |                       | F CHANGES<br>nt to Section 16(a)<br>ction 30(h) of the Ir                                      | of the S                                | ecurit                | ies Exchange                       | _  |            | Estimated average burden                                   |    | 3235-0287<br>den<br>0.5   |   |  |
| 1. Name and Address of Reporting Person <sup>*</sup> Nauman Katherine (Last) (First) (Middle) C/O PETCO HEALTH AND WELLNESS COMPANY, |             |            |  | Peto<br>WOO<br>3. Dat | uer Name <b>and</b> Tick<br>to <u>Health &amp; N</u><br>OF ]<br>te of Earliest Trans<br>7/2023 | Vellne                                  | ess (                 |                                    | telationship of Reporting Person(s) to Issuer<br>eck all applicable)<br>Director 10% Owner<br>X Officer (give title Other (specify<br>below) below)<br>Chief Marketing Officer |            |  |    |   |   |  |
| INC., 10850 VIA FRONTERA (Street) SAN DIEGO CA 92127   |             |            |  |                       | mendment, Date o   | d (Month/Day                            | 6. Indi<br>Line)<br>X | ,                                  |  |            |  |    |   |   |  |
| (City) (State) (Zip)   |             |            |  |                       |  |   |                       |                                    |  | <u> </u>   |  |    |   |   |  |
|  | Tab         | le I - No  | n-Deriva                                   | tive S                | Securities Acq   | uired,                                  | Dis                   | posed of,                          | or Be  | neficially | y Owned  |    |   |   |  |
| 1. Title of Security (Instr. 3)  |             |            | 2. Transaction<br>Date<br>(Month/Day/Year) |                       | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year)                                    | 3.<br>Transaction<br>Code (Instr.<br>8) |                       | 4. Securities<br>Disposed Of<br>5) |  |            | 5. Amount of<br>Securities<br>Beneficially<br>Owned Follow |    | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |
|  |             |            |  |                       |  | Code                                    | v                     | Amount                             | (A) or<br>(D)  | Price      | Reported<br>Transaction(s<br>(Instr. 3 and 4               |    |   | (Instr. 4)  |  |
| Class A Common Stock 01/2  |             |            | 01/27/2                                    | 023                   |  | <b>A</b> <sup>(1)</sup>                 |                       | 730                                | A  | \$8.951    | 163,663  | 2) | D   |   |  |
| Class A Common Stock   |             |            |  |                       |  |   |                       |                                    |  |            | 2,750  |    | I   | By<br>Nauman<br>Family<br>Trust                     |  |
|  | ١           | Fable II - |  |                       | curities Acqu<br>Ills, warrants,   |   |                       |                                    |  |            | Owned  |    |   | ,   |  |
| 4 7141 6 0   | 0. Turner 1 | 04 D.      |  |                       | E Number   | 0 D-/                                   | <b>F</b>              |                                    | 7 7141-  |            |  |    |   | 44 . Not  |  |

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transaction<br>Code (Instr.<br>8) |   | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |     | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>3 and 4) |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |
|---|---|--|---|---|---|---|-----|--|--------------------|---|--|---|--|--|---------------------------------------|
|   |   |  |   | Code                                    | v | (A)   | (D) | Date<br>Exercisable  | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of<br>Shares |   |  |  |                                       |

Explanation of Responses:

1. These shares of Class A common stock of the Issuer were acquired under the Petco Health and Wellness Company, Inc. 2021 Employee Stock Purchase Plan in a transaction that was exempt under both Rule 16b-3(d) and Rule 16b-3(c).

2. Includes 154,762 outstanding restricted stock units ("RSUs") granted under the Petco Health and Wellness Company, Inc. 2021 Equity Incentive Plan. Each RSU represents the right to receive one share of Class A common stock of the Issuer.

Remarks:

<u>/s/ Ilene Eskenazi, as</u> <u>Attorney-in-Fact</u> \*\* Signature of Reporting Person

<u>01/31/2023</u> 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.