FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

	Check this box if no longer subject
\neg	to Section 16. Form 4 or Form 5
_	obligations may continue. See
	Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 ar Eskena	2. Issuer Name and Ticker or Trading Symbol Petco Health & Wellness Company, Inc. [WOOF]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title below) below)				Owner er (specify						
(Last) (First) (Middle) C/O PETCO HEALTH AND WELLNESS						3. Date of Earliest Transaction (Month/Day/Year) 07/19/2023								See Remarks						
COMPANY,						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
INC., 10850 VIA FRONTERA														X Form filed by One Reporting Person Form filed by More than One Reporting						
(Street)															Person					
	SAN DIEGO CA 92127					Rule 10b5-1(c) Transaction Indication														
(City) (State) (Zip)					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Table	l - No	on-Deriva	tive S	ecui	ities	Ac	quired	l, Dis	sposed of	f, or E	Benefic	ially Owr	ned					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y					Execution Date,			3. 4. Securities Acq Transaction Code (Instr. 8) 4. Securities Acq Disposed Of (D) (and 5)					5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)					
Class A Common Stock 07/19/20.						23			F		2,895(1)	D	\$8.29	264,	264,463 ⁽²⁾		D			
Class A C	Class A Common Stock													950		I		See Footnote ⁽³⁾		
		Tab	le II	- Derivativ (e.g., pu							osed of, convertib				ed					
1. Title of Derivative Security (Instr. 3)	ive Conversion Date Execution Date, y or Exercise (Month/Day/Year) if any		ution Date,		Transaction Code (Instr. 3)		ber rative rities iired r osed) r. 3, 4	6. Date Expira (Month	tion D		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(s) (Instr. 4)		10. Ownersl Form: Direct (I or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)			
				Code	l _v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	of Shares								

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 July 19, 2022 pursuant to the Petco Health and Wellness Company, Inc. 2021 Equity Incentive Plan (the "2021 Plan"), and a portion vested on July 19, 2023.
- 2. Includes 231,104 outstanding RSUs granted under the 2021 Plan. Each RSU represents the right to receive one share of Class A common stock of the Issuer.
- 3. These shares are held by the Reporting Person's child living in her household. The Reporting Person disclaims ownership of the shares held by this child, and this report is not an admission that the Reporting Person is the beneficial owner of these shares for purposes of Section 16 or for any other purposes.

Remarks:

Chief Legal and Human Resources Officer & Secretary

<u>/s/ Ilene Eskenazi</u> <u>07/21/2023</u>

** 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.