FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

wasnington, D.	C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
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* Tichy Justin					2. Issuer Name and Ticker or Trading Symbol Petco Health & Wellness Company, Inc. [WOOF]									(Che	eck all app Direc	licable)	10		s) to Issuer 0% Owner ther (specify	
(Last) C/O PET	(Fir	rst) (ľ ΓΗ AND WELL	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/27/2024										below	,	rating Officer			
COMPANY, INC., 10850 VIA FRONTERA					4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person							
(Street) SAN DII	Street) SAN DIEGO CA 92127				Rul	Rule 10b5-1(c) Transaction Indication									Form filed by More than One Reporting Person					
(City)	(St	ate) (Z	Zip)		Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In										uction or writt	en pla	in that is inter	nded to		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					y/Year) Execution		ution [ution Date,				es Acquired (A Of (D) (Instr. 3,			Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount	(A) or (D)		Price	Transa				(11301. 4)	
Class A Common Stock 03/27/2						2024			A		14,231(1)) 1	A	\$ <mark>0</mark>	438,708(2)			D		
Class A Common Stock 03/27/2					2024				F		7,213(3)	_ 1	D	\$1.88	3 431	431,495(2)		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Dat Security or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) o Dispo of (D) (Instr and 5	rities lired r osed) r. 3, 4	6. Date Expirat (Month	ion Da	ate Ar Year) Se Ur De Se		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amo or Num of Shar	ber						

Explanation of Responses:

- 1. Represents shares of Class A common stock underlying performance stock units ("PSUs") granted on July 19, 2022 under the Petco Health and Wellness Company, Inc. 2021 Equity Incentive Plan (as amended, the "2021 Plan") that vested on March 27, 2024.
- 2. Includes 293,728 outstanding restricted stock units ("RSUs") granted under the 2021 Plan. Each RSU represents the right to receive one share of Class A common stock of the Issuer.
- 3. The transaction reported reflects the withholding of PSUs in satisfaction of the Reporting Person's tax liability as a result of the settlement of the PSUs that vested on March 27, 2024.

/s/ Giovanni Insana, as Attorney-in-Fact

03/29/2024

** 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.