SEC	Form	4
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FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287				
Estimated average burden					
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STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

			or bestion es(if) of the investment company not of Toto				
1. Name and Addre <u>Nauman Katl</u> (Last)	ss of Reporting Perso herine (First)	(Middle)	2. Issuer Name and Ticker or Trading Symbol <u>Petco Health & Wellness Company, Inc.</u> [WOOF]		ationship of Reporting Person(s) to Issuer k all applicable) Director 10% Owner Officer (give title Other (specify below) below)		
C/O PETCO HEALTH AND WELLNESS COMPANY,			3. Date of Earliest Transaction (Month/Day/Year) 12/05/2022		Chief Marketing	g Officer	
INC., 10850 VIA FRONTERA (Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Filing Form filed by One Rep		
SAN DIEGO	СА	92127			Form filed by More that Person	0	
(City)	(State)	(Zip)					

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) 2A. Deemed Execution Da if any (Month/Day/Y		ecution Date, Transactio		4. Securities Disposed Of (5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Class A Common Stock ⁽¹⁾	12/05/2022		A		91,075	Α	\$0.00	164,007(2)	D	
Class A Common Stock								2,750	Ι	By Nauman Family Trust

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned	
(e.g., puts, calls, warrants, options, convertible securities)	

										1							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Number Derivativ Securitie Acquired or Dispos of (D) (In 3, 4 and 5	e s I (A) sed str.	6. Date Exerc Expiration Da (Month/Day/h	ate	of Securities) of Securities Derivati Underlying Security Derivative Security (Instr. 5		8. Price of Derivative Security (Instr. 5)	e derivative Ownership Securities Form: Beneficially Direct (D) Owned or Indirect Following (I) (Instr. 4) Reported		11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)				
Employee Stock Option (right to buy)	\$10.98	12/05/2022		A		366,301		(3)	12/05/2032	Class A Common Stock	366,301	\$0.00	366,301	D			

Explanation of Responses:

1. Represents 91,075 restricted stock units ("RSUs") granted under the Petco Health and Wellness Company, Inc. 2021 Equity Incentive Plan (the "2021 Plan"). Each RSU represents the right to receive one share of Class A common stock of the Issuer ("Class A Common Stock"). The RSUs will vest in the following installments: (i) 10% on the date that is 6 months following 12/05/2022 (the "Grant Date"); (ii) 20% on the first anniversary of the Grant Date; (iii) 30% on the date that is 18 months following the Grant Date; and (iv) 40% on the second anniversary of the Grant Date.

2. Includes 65,612 outstanding RSUs granted under the 2021 Plan.

3. Represents options to purchase Class A Common Stock granted under the 2021 Plan. The options will vest in the following installments: (i) 10% on the date that is 6 months following Grant Date; (ii) 20% on the first anniversary of the Grant Date; (iii) 30% on the date that is 18 months following the Grant Date; and (iv) 40% on the second anniversary of the Grant Date.

Remarks:

/s/	Ilene	Eskenazi, a	<u>s Attorney-</u>	10/07/0000
	D		-	12/07/2022

in-Fact

** 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.