FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

washington, D.C. 205	949

OMB APPROVAL

- 1		
	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

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

	e conditions of ee Instruction 1																		
Name and Address of Reporting Person* Smallwood Garrett					2. Issuer Name and Ticker or Trading Symbol Wag! Group Co. [PET]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
	(Fir G! GROUP NCISCO ST	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/09/2024									Officer (give title below) Chief Executive Officer					specify
(Street) SAN FRANCI	ISCO CA	Λ 9	4133		4. If A	Amend	ment,	Date o	of Origina	al File	d (Month/Da	y/Year		6. Indiv Line)	Form	r Joint/Grou filed by One filed by Mo on	e Rep	orting Perso	on
(City)	(St	ate) (2	Zip)																
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or E	3enefi	cially	Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution		ution [Oate,			es Acquired (A) Of (D) (Instr. 3,		and Securi Benefi Owned		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 09				09/09/2	/2024 09/1		/11/20)24	s ⁽¹⁾ 51,714		51,714	1	\$0.	.72(2)	1,0	71,319		D	
		Tal	ole II -								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, //Day/Year)	4. Transaction Code (Instr. 8) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)					Owr Forr Dire or Ir (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amoun or Numbe of Shares	r					

Explanation of Responses:

- 1. The sales reported on this Form 4 represent shares required to be sold by the Reporting Person to cover tax withholding obligations in connection with the vesting of restricted stock units ("RSUs"). These sales are mandated by the Issuer's election under incentive plans to require the satisfaction of tax withholding obligations to be funded by a "sell to cover" transaction and do not represent discretionary trades by the Reporting Person.
- 2. The price in column 4 represents a weighted average sale price. The shares were sold on 9/09/2024, 9/10/2024 and 9/11/2024 at a price between \$0.70 and \$0.79. The Reporting Person undertakes to provide upon request to the staff of the Securities and Exchange Commission, the Issuer or its stockholders, full information regarding the total number of shares sold at each separate price within the range set forth herein.

Remarks:

/s/ Garrett Smallwood

09/11/2024

** 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.