FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 OMB Number: 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

Name and Address of Reporting Person* Storm Adam						2. Issuer Name and Ticker or Trading Symbol Wag! Group Co. [PET]									k all appli Directo	ctor		10% O	vner	
(Last) (First) (Middle) 55 FRANCISCO STREET, SUITE 360						3. Date of Earliest Transaction (Month/Day/Year) 10/06/2023									Officer (give title below) Pres. & Chie		ef Pro	Other (solution of the delay)	specify	
(Street) SAN FRANCISCO CA 94133					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S		(Zip)	n-Deriv	Rule 10b5-1(c) Transaction Indication 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. Rative Securities Acquired, Disposed of, or Beneficially Owned													ed to		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				action	ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Tran	3. Transaction Code (Instr.		4. Securities Acquired (A)			5. Amou Securitie Benefici Owned I	nt of es ally Following	Form (D) o	n: Direct r Indirect sstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Cod	e V	Amount	Amount (A) or (D)		e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 10/					5/2023				M ⁽¹		1,00	1,000		.09	867	867,198		D		
Common Stock			10/06	10/06/2023				S ⁽²⁾		1,00	0 [) (S <mark>2</mark>	866,198			D			
		T	able II -								osed of converti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transacti Code (Ins				6. Date Exercisa Expiration Date (Month/Day/Yea		•	Amount Securitie Underlyi Derivativ	7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		. Price of Perivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership tt (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis		Expiration Date	Title	Amou or Numb of Share	er						
Options to purchase shares of Wag! Group Co. common	\$0.09	10/06/2023			M ⁽¹⁾			1,000	(3)		03/17/2030	Common Stock	1,00	0	\$0	1,250,38	83	D		

Explanation of Responses:

- 1. The stock option exercise reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on June 14, 2023.
- 2. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on June 14, 2023.
- 3. The option to purchase shares of Wag! Group Co. common stock vest in 48 equal monthly installments beginning on January 13, 2020. As of the filling date, 1,169,282 options from this grant were exercisable.

Remarks:

/s/ Adam Storm

10/10/2023

** 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.