FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | JVAL | | | | |
|------------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0287 | | | | |
| Estimated average burd | en | | | | |
| hours per response: | 0.5 | | | | |

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

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* Sheedy Robert Joseph Jr. (Last) (First) (Middle) C/O GROCERY OUTLET HOLDING CORP. 5650 HOLLIS STREET | | | | | 3. D 06/ | 2. Issuer Name and Ticker or Trading Symbol Grocery Outlet Holding Corp. [GO] 3. Date of Earliest Transaction (Month/Day/Year) 06/13/2022 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title Other (specify below) President 7. President | | | | | | | | | wner | | | | | | |
|---|--|--|---|-------|---------------------------|---|---|--------|-------------------------------------|--------------------|-----------------------------|------------------|-------------|-----------|---|---|--|--|--|--|--|
| (Street) EMERY (City) | VILLE C | | 94608 (Zip) | | 4. If | | | | | | | | | | Lin | e) X Form Form | idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | Execution ay/Year) if any | | A. Deemed kecution Date, any lonth/Day/Year) | | Transaction Dispose Code (Instr. 5) | | 4. Securi Disposed 5) | | | | Benefic | es ially Following | Form (D) o | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | [| Code | v | Amount | | A) or D) | Price | Transac (Instr. 3 | tion(s) | | | (11150.4) | | |
| Common | Stock | | | 06/13 | /2022 | | | M | | 6,667 A | | \$3.8 | <u> </u> | | | D | | | | | |
| Common Stock 06/13/ | | | | /2022 | 2022 | | | | S ⁽¹⁾ | | 6,667 D \$3 | | \$38.3 | 32 66,242 | | | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, | | ransaction ode (Instr. | | n of E | | Pate Exemination I | Date | Amount of | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exe | e ercisable | | xpiration ate | Title | | Amount or Number of Shares | | | | | | |
| Stock Options (Right to Buy) | \$3.81 | 06/13/2022 | | | М | | | 6,667 | | (2) | 1 | 1/25/2024 | Comi | | 6,667 | \$0 | 70,392 | | D | | |

Explanation of Responses:

- 1. This transaction was effected pursuant to a previously adopted Rule 10b5-1 trading plan.
- 2. These stock options are vested and exercisable.

Remarks:

/s/ Lauri Fischer, Lauri Fischer,

06/14/2022

attorney-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.