# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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).

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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* Weddell Steven M  (Last) (First) (Middle) 2005 EAST INDIAN SCHOOL ROAD  (Street)  PHOENIX, AZ 85016 |               |                                 |  | 2. Issuer Name and Ticker or Trading Symbol Leslie's, Inc. [LESL]     3. Date of Earliest Transaction (Month/Day/Year)     02/08/2022     4. If Amendment, Date Original Filed(Month/Day/Year) |  |  |                  |                                 |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner X_Officer (give title below) Other (specify below)  See Remarks |                                   |  |              |               |  |  |
|--|---------------|---------------------------------|--|--|--|--|------------------|---------------------------------|--|---|-----------------------------------|--|--------------|---------------|--|--|
|  |               |                                 |  |  |  |  |                  |                                 |  |   |                                   |  |              |               |  |  |
|  |               |                                 |  |  |  |  |                  |                                 | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person |   |                                   |  |              |               |  |  |
| (City) (State) (Zip)   |               |                                 | Table I - Non-Derivative Securities Acqu |  |  |  |                  | s Acqui                         | uired, Disposed of, or Beneficially Owned  |   |                                   |  |              |               |  |  |
| 1.Title of Security<br>(Instr. 3)  |               |                                 | 2. Transaction<br>Date<br>(Month/Day/    |  | 2A. Deemed<br>Execution Date, if<br>any    |  | (Instr. 8)       |                                 | 4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)   |   | of (D)                            | D) Beneficially Owned For<br>Reported Transaction( |              | Following (s) | Ownership<br>Form:   | Beneficial   |
|  |               |                                 |  |  | (Month/                                    | /Day/Year                                  | Cod              | e V                             | Amount   | (A)<br>or<br>(D)  | Price                             | (Instr. 3 a  | (I)          |               | or Indirect  | Ownership<br>(Instr. 4)                            |
| Common Stock, par value \$0.001 per share  |               | 02/08/2022                      |  |  |  | P  |                  | 25,000                          | A  | \$<br>19.8  | 1,411,377                         |  | I            | D             |  |  |
| Reminder:  | Report on a s | separate line fo                | or each                                  | ı class of secui   | rities ben                                 | neficially o                               | wned di          | Per                             | sons wh  | o respo   |                                   |  | ction of inf | ormation      |  | 474 (9-02)   |
| Reminder:  | Report on a s | separate line fo                | or each                                  | Table II -   | Derivati                                   | ive Securit                                | ies Acq          | Per<br>cor<br>the               | sons who<br>tained in<br>form dis  | o respo<br>this fo<br>plays a<br>f, or Be   | orm are<br>curre                  | not requesting ntly valid                          | ired to res  |               | ss   | 474 (9-02)   |
| 1. Title of  | •             | 3. Transaction Date (Month/Day/ | on                                       | Table II -   | Derivati<br>(e.g., put<br>4.<br>ate, if Tr | ive Securit<br>ts, calls, we<br>ransaction | ies Acquarrants, | Per cor the dired, I option (M) | sons who<br>tained in<br>form dis  | o responding this for Bendible securisable in Date  | neficial<br>urities) 7. Ti<br>Amo | not requesting ntly valid                          | OMB conf     | spond unle    | of 10. Ownersh Form of Derivativ Security: Direct (I or Indire | 11. Nation of Indirection Benefic Owners (Instr. 4 |

## **Reporting Owners**

|   | Relationships |              |             |       |  |
|---|---------------|--------------|-------------|-------|--|
| Reporting Owner Name / Address  | Director      | 10%<br>Owner | Officer     | Other |  |
| Weddell Steven M<br>2005 EAST INDIAN SCHOOL ROAD<br>PHOENIX, AZ 85016 |               |              | See Remarks |       |  |

## **Signatures**

| /s/ Brad A. Gazaway, as Attorney-in-Fact for Steven M. Weddell | 02/09/2022 |
|--|------------|
| **Signature of Reporting Person                                | Date       |

## **Explanation of Responses:**

- \* 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).
- This transaction was executed in multiple trades at prices ranging from \$19.67 to \$19.89. The price reported above reflects the weighted average price. The Reporting Person (1) hereby undertakes to provide upon request to the SEC staff, the Issuer, or a security holder of the Issuer full information regarding the number of Shares and prices at which the trades were effected.

#### Remarks:

Executive Vice President, Chief Financial Officer and Treasurer

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.