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**To:** PetSmart Associates

**From:** Chris Stillman  
Director of Benefits and Offerings

**Date:** August 2020

**Re:** Summary Annual Reports

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The attached Summary Annual Reports highlight expenses for the 2019 SmartChoices benefits plan premiums paid for insurance coverage, along with the SaveSmart 401(k) Plan fees. PetSmart is legally required to let you know about certain financial information related to benefit programs. The summary lets you know about your rights to request information about the SmartChoices benefit plans financial information.

This financial information is reported in an annual tax return that's files with the Employee Benefits Security Administration, a division of the U.S. Department of Labor. You can request a copy of the full annual report (see the address on the attached summary).

If you have any questions about the report, please contact me at (623)295-3427 or [cstillman@petsmart.com](mailto:cstillman@petsmart.com).

Attachments: 2019 Summary Annual Report – PetSmart SmartChoices Benefit Plan  
2019 Summary Annual Report – PetSmart, Inc SaveSmart 401(K) Plan

**SUMMARY ANNUAL REPORT FOR  
PETSMART SMARTCHOICES BENEFIT PLAN**

This is a summary of the annual report of the PetSmart Smartchoices Benefit Plan (Employer Identification Number 94-3024325, Plan Number 501) for the plan year 01/01/2019 through 12/31/2019. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

PetSmart, Inc. has committed itself to pay certain medical claims incurred under the terms of the plan.

**Insurance Information**

The plan has insurance contracts with Vision Service Plan, Cigna Health and Life Insurance Company and Affiliates (CIGNA), United Behavioral Health dba Optum and Life Insurance Company of North America to pay certain life, accidental death and dismemberment, vision, dental, temporary disability, long-term disability and employee assistance program claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2019 were \$12,168,164.

Because they are so called "experience-rated" contracts, the premium costs are affected by, among other things, the number and size of claims. Of the total insurance premiums paid for the plan year ending 12/31/2019, the premiums paid under such "experience-rated" contracts were \$1,498,046 and the total of all benefit claims paid under these experience-rated contracts during the plan year was \$1,218,571.

**Your Rights to Additional Information**

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

- Insurance information, including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the plan administrator, at 19601 North 27th Avenue, Phoenix, AZ 85027 and phone number, 623-587-2737.

You also have the legally protected right to examine the annual report at the main office of the plan: 19601 North 27th Avenue, Phoenix, AZ 85027, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

**Paperwork Reduction Act Statement**

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average less than one minute per notice (approximately 3 hours and 11 minutes per plan). Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of the Chief Information Officer, Attention: Departmental Clearance Officer, 200 Constitution Avenue, N.W., Room N-1301, Washington, DC 20210 or email DOL\_PRA\_PUBLIC@dol.gov and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires 06/30/2022)

**SUMMARY ANNUAL REPORT FOR  
PETSMART, INC. SAVESMART 401(K) PLAN**

This is a summary of the annual report for the PetSmart, Inc. SaveSmart 401(k) Plan (Employer Identification Number 94-3024325, Plan Number 001) for the plan year 01/01/2019 through 12/31/2019. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

**Basic Financial Statement**

Benefits under the plan are provided by a trust fund. Plan expenses were \$29,564,618. These expenses included \$912,901 in administrative expenses and \$28,513,523 in benefits paid to participants and beneficiaries, and \$138,194 in other expenses. A total of 55217 persons were participants in or beneficiaries of the plan at the end of the plan year, although not all of these persons had yet earned the right to receive benefits.

The value of plan assets, after subtracting liabilities of the plan, was \$372,626,400 as of the end of the plan year, compared to \$289,249,248 as of the beginning of the plan year. During the plan year the plan experienced a change in its net assets of \$83,377,152. This change includes unrealized appreciation or depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year or the cost of assets acquired during the year. The plan had total income of \$112,941,770, including employer contributions of \$10,313,862, employee contributions of \$29,241,260, other contributions/other income of \$3,413,598, and earnings from investments of \$69,973,050.

**Your Rights to Additional Information**

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

1. An accountant's report.
2. Financial information and information on payments to service providers.
3. Assets held for investment.
4. Information regarding any common or collective trusts, pooled separate accounts, master trusts or 103-12 investment entities in which the plan participates.

To obtain a copy of the full annual report, or any part thereof, write or call the plan administrator, at 19601 North 27th Avenue, Phoenix, AZ 85027 and phone number, 623-587-2737. The charge to cover copying costs will be \$5.00 for the full annual report, or \$0.25 per page for any part thereof.

You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these two statements and accompanying notes will be included as part of that report. The charge to cover copying costs given above does not include a charge for the copying of these portions of the report because these portions are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the plan: 19601 North 27th Avenue, Phoenix, AZ 85027, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

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