FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

## INITIAL STATEMENT OF 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

Name and Address of Reporting Person*     O'Connor Gavin M.	2. Date of Requiring (Month/Da 08/05/20	Statement ay/Year)	3. Issuer Name and Ticker or Trading Symbol  European Wax Center, Inc. [ EWCZ ]					
(Last) (First) (Middle) C/O EUROPEAN WAX CENTER, INC.			4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give Other (specify		wner Fil	5. If Amendment, Date of Original Filed (Month/Day/Year) 08/05/2021		
5830 GRANITE PARKWAY, 3RD FLOOR	_		CLO and Corpor	below) rate Secreta	iry (C	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person		
(Street) PLANO TX 75024	_						by More than One Person	
(City) (State) (Zip)								
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)			Amount of Securities     Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4) 2. Date E Expiratio (Month/D			3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	or Indirect (I) (Instr. 5)		
Employee stock option (right to buy)	08/04/2024	08/04/2031	Class A common stock	21,533 <sup>(1)</sup>	17	D		

## **Explanation of Responses:**

1. These options were omitted from the reporting person's original Form 3.  $\,$ 

/s/ Gavin M. O'Connor

08/06/2021

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).
- $^{\star\star} \ Intentional \ misstatements \ or \ omissions \ of facts \ constitute \ Federal \ Criminal \ Violations \ See \ 18 \ U.S.C. \ 1001 \ and \ 15 \ U.S.C. \ 78 \ ff(a).$

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.