

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

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

## 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 *      |                                       |             |             |               | 2. Issuer Name <b>and</b> Ticker or Trading Symbol   |                           |                            |            |                                |               |  |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)                 |  |                    |   |
|--|---------------------------------------|-------------|-------------|---------------|--|---------------------------|----------------------------|------------|--------------------------------|---------------|--|---|---|--|--------------------|---|
| FOSS ERIC J                                    |                                       |             |             | P             | Primo Water Corp /CN/ [ PRMW ]   |                           |                            |            |                                |               |  | (Check an app   | oncaoic)  |  |                    |   |
| (Last) (First) (Middle)                        |                                       |             |             | 3.            | 3. Date of Earliest Transaction (MM/DD/YYYY)   |                           |                            |            |                                |               |  | _X_ Director  |   |  |                    |   |
|  |                                       |             |             |               |  |                           |                            |            |                                |               |  | Officer (giv  | Officer (give title below) Other (specify below)  |  |                    |   |
| 1150 ASSEMBLY DRIVE, SUITE 800                 |                                       |             |             |               | 5/31/2023  |                           |                            |            |                                |               |  |   |   |  |                    |   |
|  | (Stree                                | et)         |             | 4.            | If An  | nendme                    | nt, Date O                 | rigir      | nal Filed                      | (MM/DI        | D/YYY  | Y) 6. Individual o  | or Joint/G  | roup Filing  | (Check Appl        | icable Line)  |
| TAMPA, FL 33607                                |                                       |             |             |               |  |                           |                            |            |                                |               |  |   | X _ Form filed by One Reporting Person Form filed by More than One Reporting Person     |  |                    |   |
| (C   | ity) (Stat                            | te) (Zip    | p)          | Rı            | 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. |                           |                            |            |                                |               |  |   |   |  |                    |   |
|  |                                       |             | Table I     | - Non-De      | rivati   | ve Seci                   | urities Acc                | quir       | ed, Dis <sub>l</sub>           | osed of       | f, or I  | Seneficially Owne   | ed  |  |                    |   |
| 1. Title of Security (Instr. 3)  2. Trans. D   |                                       |             |             | . Trans. Date | Date 2A. Deemed Execution Date, if any   |                           | 3. Trans. Co<br>(Instr. 8) | de         | or Disposed of (D)             |               |  | 5. Amount of Securi<br>Following Reported<br>(Instr. 3 and 4) | Amount of Securities Beneficially Owned ollowing Reported Transaction(s) nstr. 3 and 4) |  |                    | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |
|  |                                       |             |             |               |  |                           | Code                       | V          | Amount                         | (A) or<br>(D) | Price  | :   | or In<br>(I) (Ii<br>4)  |  |                    | (Instr. 4)  |
| Common Shares                                  |                                       |             |             | 5/31/2023     |  |                           | A                          |            | 10489 (1                       | ) A           | \$12.8   | 7   | 11732   |  | D                  |   |
|  | Tab                                   | le II - Der | ivative S   | Securities    | Bene   | eficially                 | Owned (                    | e.g.,      | puts, c                        | alls, wa      | rrant  | s, options, conver  | tible secu  | ırities)   |                    |   |
| 1. Title of Derivate<br>Security<br>(Instr. 3) | ecurity Conversion Date Execution (In |             | n (Instr. 8 |               | Derivation<br>Acquired<br>Disposed   | ve Securities<br>d (A) or |                            | Expiration | Expiration Date Secur<br>Deriv |               | and Amount of<br>ies Underlying<br>tive Security<br>3 and 4) | Derivative<br>Security<br>(Instr. 5)                          | derivative<br>Securities<br>Beneficially<br>Owned<br>Following                          | Ownership<br>Form of<br>Derivative<br>Security:<br>Direct (D)<br>or Indirect | Beneficial         |   |
|  |                                       |             |             | Code          | V  | (A)                       | (D)                        | Exe        |                                | Date          |  | Shares  |   | (Instr. 4)   | (1) (IIIsti.<br>4) |   |

### **Explanation of Responses:**

(1) Common Shares were issued pursuant to the Primo Water Corporation 2018 Equity Incentive Plan in payment of the reporting person's annual director fee. The number of shares was calculated by dividing \$135,000 (the cash amount of the annual director fee) by \$12.87 (the closing price of the Common Shares on the New York Stock Exchange on May 31, 2023).

#### Reporting Owners

| reporting Owners             |          |               |                |       |  |  |  |  |
|------------------------------|----------|---------------|----------------|-------|--|--|--|--|
| Panarting Owner Name / Addre | 9.0      | Relationships |                |       |  |  |  |  |
| Reporting Owner Name / Addre | Director | 10% Owner     | ips<br>Officer | Other |  |  |  |  |
| FOSS ERIC J                  |          |               |                |       |  |  |  |  |
| 1150 ASSEMBLY DRIVE          | X        |               |                |       |  |  |  |  |
| SUITE 800                    | Λ        |               |                |       |  |  |  |  |
| TAMPA, FL 33607              |          |               |                |       |  |  |  |  |

### **Signatures**

/s/ Marni Morgan Poe, Attorney-in-Fact 6/2/2023

\*\*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 control number.